

HIPAA BASICS™

User Manual for TRICARE

For Subscriber Users
Manual Version 1.0

by
Strategic Management Systems, Inc.
112 S. West Street Alexandria, Suite 200, VA 22314

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CREDITS

HIPAA BASICS™

Designed and Produced by: Strategic Management Systems, Inc.

Lead Programmer: Alok Chadda

Lead Tester: Kristy Kuhn, Marah Al-Eidy

Product Manager: Cornelia Dorfschmid

The Manual

Written by: Strategic Management Systems, Inc.

Design and Layout: Strategic Management Systems, Inc.

Editors: Marah Al-Eidy, Alok Chadda, Cornelia Dorfschmid, Kristy Kuhn

Writing Manager: Cornelia Dorfschmid

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TABLE OF CONTENTS

INTRODUCTION.....	vi
About HIPAA BASICS™	vi
System Requirements	vi
Getting Started	vi
1. PRE-PLANNING FOR HIPAA BASICS™	7
1.1 Developing the Assessment Strategy	7
1.2 Assembling the Necessary Documentation	7
1.3 Organizing the Privacy Team	7
1.4 Creating the “Team Assigned”	8
1.5 Conducting the Assessment	8
1.6 Creating a Remediation Project	8
1.7 Tracking Progress During Remediation.....	9
2. USER TYPES	10
2.1 Subscriber.....	10
2.2 Subscriber Administrator	10
2.3 Lead Users.....	10
2.4 Regular Users	11
3. ACCESSING HIPAA BASICS™	12
3.1 Logging in.....	12
3.2 Main Menu Screen.....	14
3.3 Demo Gap	14
3.4 Info Page	15
3.5 Help Page	15
4. ADMINISTRATION	16
4.1 Subscriber Administration Functions	16
4.2 Gap Analysis Projects	17
4.3 User Administration.....	20
4.4 Interactions with TMA HIPAA Help Desk and Administrative Users.....	22
5. HIPAA BASICS™ MODULES	23
5.1 Gap Analysis Project List	23
5.2 Users.....	25
5.3 Policies and Forms	27
6. SETTING UP ASSIGNMENTS	30
6.1 Gap Analysis Setup	30
6.2 Assigning Users	32
6.3 Assigning Requirements	35
6.4 Reassigning User Assignments	37

6.5	Deleting a User from a Team.....	39
6.6	Viewing User Assignments.....	39
7.	DEFINING TASKS AND REQUIREMENTS	40
7.1	Accessing the Answer Requirements Screen.....	40
7.2	Filtering Requirements.....	42
7.3	Answering a Requirement and its Test/Task Items	43
7.4	Making Requirement Notes	46
7.5	Writing Task Notes	47
8.	REPORTING	49
8.1	Generating the Reports.....	49
8.2	Filtering Reports	50
8.3	Modifying Reports	52
8.4	Graphical Status Report	54
8.5	Upgrade the Gap Analysis/Assessment	55
8.6	Trace Reports	56
9.	PROJECT PLAN	60
9.1	Generating a Project Plan.....	60
10.	TECHNICAL SUPPORT.....	62
10.1	Systems Administration.....	62
10.2	Getting Information Updates	62
10.3	Getting Version Upgrades.....	63
10.4	Help Menus	64
10.5	Troubleshooting	65
10.6	Archiving	66
10.7	Technical Configuration	67
10.8	Group Emails	69
10.9	Help Desk.....	69
11.	GLOSSARY.....	70
12.	INDEX.....	72

LIST OF EXHIBITS

Exhibit 3-1. Login Screen.....	12
Exhibit 3-2. Terms of Use	12
Exhibit 3-3. Enter User Name and Password.....	13
Exhibit 3-4. Main Menu Screen.....	14
Exhibit 3-5. Demo Gap	14
Exhibit 3-6. Help Screen.....	15
Exhibit 4-1. Main Admin Screen.....	16
Exhibit 4-2. Gap Analysis Project List Screen.....	17
Exhibit 4-3. Add New Gap Analysis Project Screen.....	18
Exhibit 4-4. User Admin Screen.....	20
Exhibit 4-5. Add New User Screen.....	21
Exhibit 5-1. Gap Analysis Project List	23
Exhibit 5-2. Users Screen – User Team by Gap ID.....	25
Exhibit 5-3. Users Screen Shot – User Team by Gap ID.....	26
Exhibit 5-4. Policies and Forms	27
Exhibit 5-5. Policies and Forms – by HIPAA Rule	27
Exhibit 5-6. Policies and Forms – by Category	28
Exhibit 6-1. Edit Gap Analysis Screen	30
Exhibit 6-2. Assigning New Users	32
Exhibit 6-3. Assign Requirements Screen.....	33
Exhibit 6-4. Adding Users through Team Assigned Screen.....	33
Exhibit 6-5. Lead Users – Assigning Requirements.....	35
Exhibit 6-6. Lead User – Reassigning User Assignments.....	37
Exhibit 6-7. Lead User - Edit Gap Analysis and User Assignments	37
Exhibit 6-8. Lead User – Reassigning User Assignments Completed.....	38
Exhibit 6-9. Lead User – Deleting users from gap analysis	39
Exhibit 7-1. Gap Analysis Project List Screen.....	40
Exhibit 7-2. Requirements and Gap Answers Screen.....	41
Exhibit 7-3. Requirements and Gap Answers Screen – Filters.....	42
Exhibit 7-4. Requirement Tasks Screen.....	43
Exhibit 7-5. Requirements Tasks Screen Test/Task Items	44
Exhibit 7-6. Requirement Tasks Screen – Requirement Question	46
Exhibit 7-7. Requirement Notes Screen.....	46
Exhibit 7-8. Requirement Tasks Screen – Task Notes.....	47
Exhibit 7-9. Task Notes Screen.....	48
Exhibit 8-1. Gap Analysis Project List Screen.....	49
Exhibit 8-2. Reporting Screen.....	50
Exhibit 8-3. Reports by Filter	51
Exhibit 8-4. Report Styles	52
Exhibit 8-5. Gap Analysis Report	53
Exhibit 8-6. Lead User - Status Page	54
Exhibit 8-7. Gap Analysis Status Report in Graphic Format.....	55
Exhibit 8-8. Requirement List Trace Report.....	56
Exhibit 8-9. Requirement Trace Report (Newly Added)	57

Exhibit 8-10. Task Trace Report (Newly Added)	58
Exhibit 8-11. Task Trace Report (Major Change).....	58
Exhibit 9-1. Setting up Project Plan.....	60
Exhibit 10-1. Help Screen.....	64
Exhibit 10-2. Help Text Display Problem.....	65
Exhibit 10-3. Setting Up the Browser to Accept Cookies.....	67
Exhibit 10-4. Setting up Acrobat to view HIPAA BASICS™ PDF documents.....	68
Exhibit 10-5. Sample TMA HIPAA Help Desk Group Email.....	69

INTRODUCTION

About HIPAA BASICS™

HIPAA BASICS™ provides access to regulatory requirements and tasks, and helps assess compliance status, assists tracking and reporting, and project planning. It is specifically designed for those who have responsibilities in assessing and implementing compliance with the regulations relating to the Health Insurance Portability Act of 1996 Administrative Simplification. HIPAA BASICS™ allows users to conduct online HIPAA compliance assessments, status reports, gap analysis reports, and generate and download project plans that are based on these assessments.

System Requirements

Hardware

- ▶ IBM Compatible PC with Intel PII-350 processor (or better) with 64 MB (or higher) RAM
- ▶ Mouse or pointing device.

Software

- ▶ Microsoft Internet Explorer version 5.0 (or higher),
- ▶ Notepad
- ▶ Adobe Acrobat Reader 5+, and
- ▶ Microsoft Project 2000

Settings

The PC should be configured to access the TMA network.

Getting Started

Users require a valid account with a user name and password in order to access HIPAA BASICS. Subscriber Administrators are responsible for setting up and maintaining this information. If you do not know who your Subscriber Administrator is, contact the Privacy Official of the MTF. Before you login you have to know the “Subscriber” name of your MTF. The Subscriber Administrator or Privacy Official will be able to provide that information. You may also contact the TMA HIPAA Help Desk.

The best way to get started is to login and use the DEMO GAP. This is an assessment (Gap Analysis) every user will see and have access to and is free to experiment with. It will not count toward a limit of assessments set by the License Pak, nor will it be real assessment. It is meant as a learning tool. Click on the hyperlinks and explore especially the link under the “Answer” column. DEMO GAP is explained more fully in Section 3.

1. PRE-PLANNING FOR HIPAA BASICS™

This section describes the recommended best practice approach for using HIPAA BASICS™ in order to assess and track privacy compliance. This approach involves the following steps:

- ▶ Developing the Assessment Strategy
- ▶ Assembling the Necessary Documentation
- ▶ Organizing the Privacy Team
- ▶ Creating the Team Assigned
- ▶ Conducting the Assessment
- ▶ Creating a Remediation Project
- ▶ Tracking Progress During Remediation

1.1 Developing the Assessment Strategy

The assessment strategy is developed to ensure that all aspects of privacy within the organization are covered. The strategy determines whether this can be accomplished with one overall assessment or if the process should be broken down into several assessments.

Private sector experience shows that if a gap exists at the highest level of the covered entity, it also exists at other levels. Therefore, a gap found once indicates that remediation is required throughout the entire delivery system.

MTFs with very complex organizational structures that are considering conducting multiple assessments are strongly encouraged to contact the TMA HIPAA Help Desk for advice and assistance prior to initiating HIPAA BASICS™ assessments.

1.2 Assembling the Necessary Documentation

Current policies, procedures, protocols, forms, and other documentation related to the following issues should be gathered for reference:

- ▶ Release of health information
- ▶ Patient access to health information
- ▶ Patient consent and authorization
- ▶ Business associate agreements
- ▶ Developing and finalizing policies and procedures
- ▶ Procedural training

1.3 Organizing the Privacy Team

The Chief Privacy Officer identifies the staff resources necessary to conduct the assessment. The Chief Privacy Official should consider assigning team members based on the major functional areas impacted by the privacy regulations (e.g., patient records,

nursing). Designated department managers gather data more efficiently from their key departments and can report this information to the Chief Privacy Official.

1.4 Creating the “Team Assigned”

“Team Assigned” is a term used in HIPAA BASICS™. It refers to a team of users within a Subscription who work jointly on an assessment. Each assessment will have its own distinct Team Assigned.

Subscriber Administrator creates and manages the accounts of the Team Assigned. Detailed functions of the Subscriber Administrator are described fully in Section 2.

The Chief Privacy Official becomes the Lead User and sets up and manages the privacy assessment. As the Lead User, the Chief Privacy Officer identifies individuals who will be designated to view, process, and load content into the MTF-Level Assessment. These Regular Users comprise the Team Assigned. Depending on the MTF’s assessment strategy there may be more than one Lead User and more than one Team Assigned. Lead Users in one assessment may also be Regular Users in another assessment.

Specific roles for Subscriber Administrators, Lead Users, and Regular Users are described in greater detail in Section 2.

1.5 Conducting the Assessment

Utilizing HIPAA BASICS™, each MTF will be able to create an MTF-Level Privacy Assessment and generate compliance status reports for the assessment. The goal is to conduct a single MTF-Level Privacy Assessment and avoid duplicative efforts

The completed privacy assessment becomes the basis for the MTF remediation plan and then acts as the baseline for progress.

Experience has shown that assessments can take from 6 weeks to 3 months depending on the size and complexity of the entity being assessed. The primary drivers of this time other than size and complexity are:

- ▶ Developing the Privacy Team
- ▶ Assembling necessary documentation
- ▶ Availability of Privacy Team to work on the assessment
- ▶ Knowledge and understanding of HIPAA regulations

1.6 Creating a Remediation Project

The resulting remediation project plan will be further tailored to the MTF’s nomenclature, resources, and time estimates. The project plan may be presented in Microsoft Excel, but first must be downloaded in MS Project and from there converted to Excel.

During remediation, Lead Users may also refer to the *Policies & Procedures* module in the tool and download Privacy policies in draft format. These templates aid the CPO in drafting more detailed policies and procedures.

1.7 Tracking Progress during Remediation

Locking the MTF-Level Privacy Assessment freezes the compliance status of the MTF in a point in time. To track progress, it is suggested to use the “New Version” feature that duplicates the final Privacy Assessment with all its entered notes, answers and Team Assigned – ONLY AFTER the assessment process is complete and locked.

This duplicate will be unlocked and used to record progress going forward. Now users should login to set “Incomplete” items (i.e., gaps) to “Complete” items, while they work toward closing gaps. After a set period, the Chief Privacy Official should aim towards completing this second assessment, which should record gaps as completed. Once that is accomplished, this second assessment should be locked again. The Chief Privacy Official will monitor progress similarly to the first assessment.

2. USER TYPES

A number of users access the HIPAA BASICS™ tool for varying purposes. Below describes different user types.

2.1 Subscriber

Subscriber refers to the organization that has purchased HIPAA BASICS™. The Subscriber name is used in conjunction with the username and password to gain access to the HIPAA BASICS™ tool.

2.2 Subscriber Administrator

The Subscriber Administrator manages the HIPAA BASICS™ user accounts within the MTF and its freestanding clinics. The Subscriber Administrator sets up users; provides user names and passwords; adds and modifies users; and maintains all user information. In addition, the Subscriber Administrator of an MTF will be able to view and access all compliance assessments of the MTF.

The Subscriber Administrator may also set up a compliance assessment for a Lead User.

The TMA HIPAA Help Desk will establish Subscriber Administrator accounts for each MTF. The Subscriber Administrator of each MTF will then have the responsibility of establishing accounts for Leader Users and Regular Users at the MTF.

Only Subscriber Administrator can access the Admin screen.

2.3 Lead Users

Lead Users establish compliance assessments, run reports, and generate project plans (for downloading). All reports and outputs will be based on the particular compliance assessments that the Lead User has set up.

Lead Users assign HIPAA Requirements to Regular Users for compliance assessment; add or remove team members to a compliance assessment; and “lock” a compliance assessment to prevent any further modifications. Lead Users have access to all information in their compliance assessments and are able to make changes to them. (Lead Users will be able to perform the functions of a Regular User on another Lead User’s compliance assessment. However, the Lead User will have the privileges of a Regular User only on that compliance assessment). Lead Users may access the HIPAA Policies and Procedures Module of the software and will be able to download policy templates to reference.

Lead Users are generally high-level managers that serve in positions such as HIPAA Project Director, Privacy or Chief Privacy Official, Compliance Officer, or Security Officers, Reimbursement Manager.

2.4 Regular Users

Regular Users have the most basic access to the HIPAA BASICS™ tool. Lead Users assign Requirements Questions to them as part of a compliance assessment. Regular Users answer only the Requirements Questions to which they are assigned. However, they may view the work of other users assigned to the same compliance assessment. Regular Users are typically subject matter experts in specific areas or assistants to the Lead Users and affiliated with HIPAA work groups.

3. ACCESSING HIPAA BASICS™

3.1 Logging in

Users can access the HIPAA Basics application at www.hipaacompliance.tricare.osd.mil. Click on Login to access the Subscriber account.

Exhibit 3-1. Login Screen

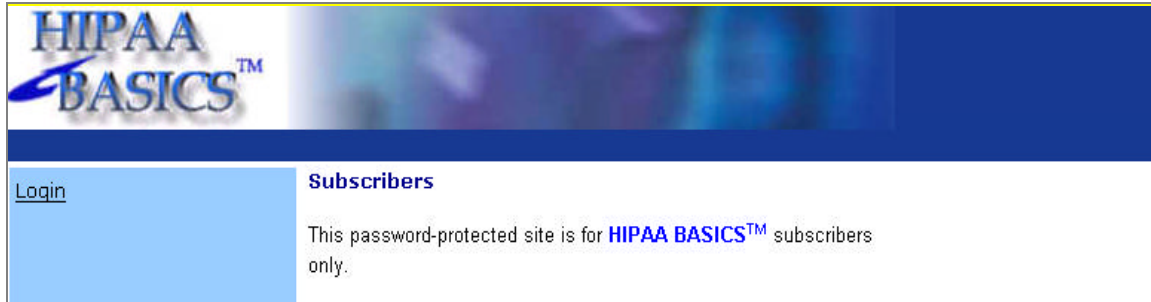
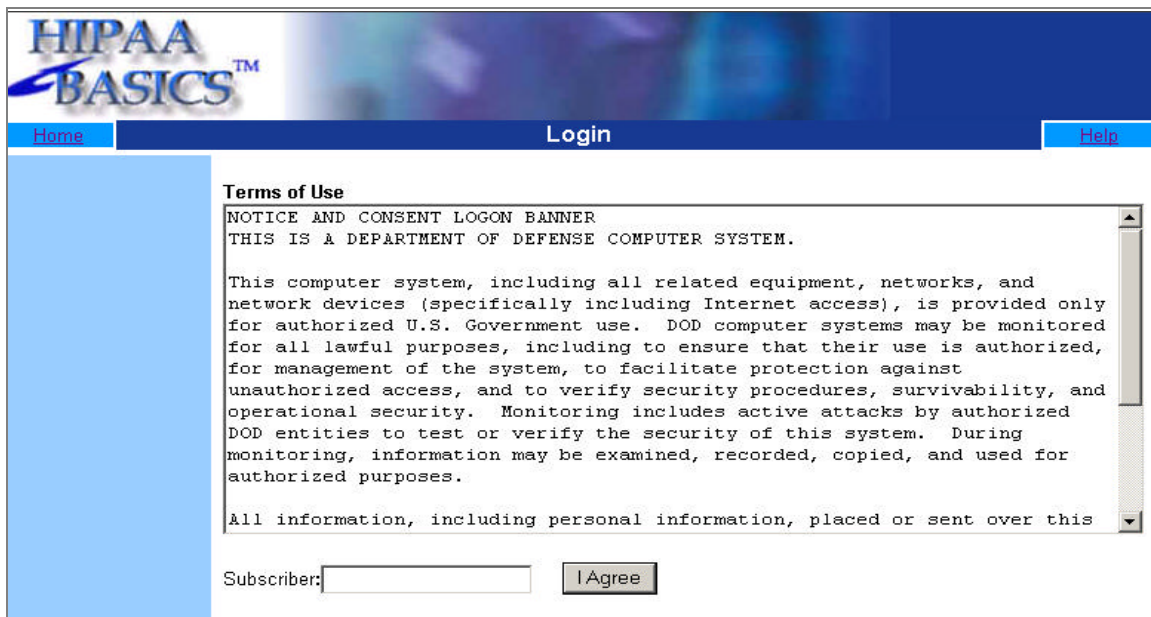
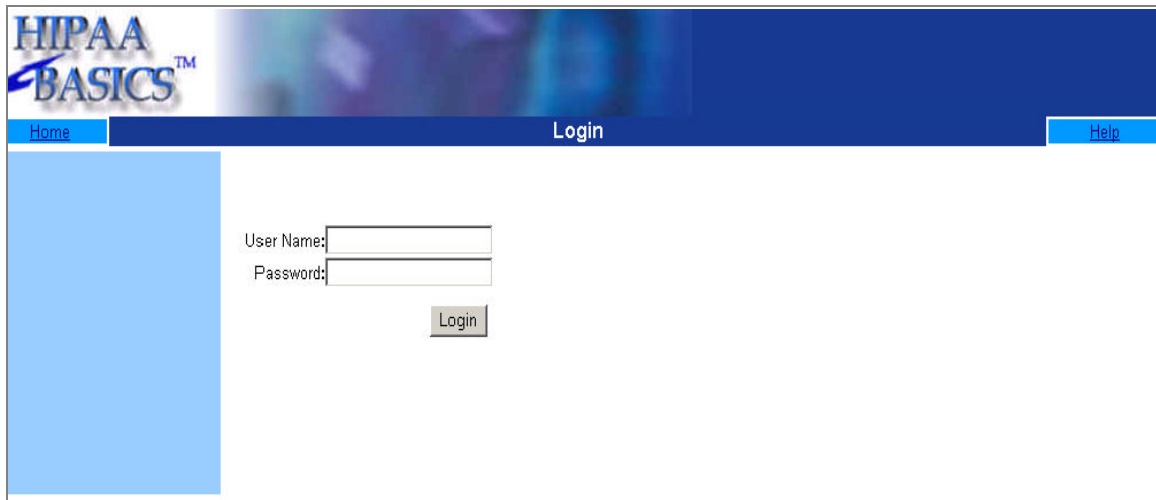


Exhibit 3-2. Terms of Use



Enter the Subscriber's name and Click on I Agree. If you don't know your MTF's Subscriber name, contact the TMA HIPAA Help Desk.

Exhibit 3-3. Enter User Name and Password



The screenshot shows the login interface for HIPAA BASICS. At the top, there is a blue header bar. On the left side of the header is the 'HIPAA BASICS' logo. On the right side of the header are three navigation buttons: 'Home', 'Login', and 'Help'. The 'Login' button is currently selected and highlighted. Below the header, the page is divided into a light blue sidebar on the left and a main white content area on the right. In the main content area, there is a login form consisting of two text input fields. The first field is labeled 'User Name:' and the second field is labeled 'Password:'. Below these two fields is a button labeled 'Login'.

Click Login and enter User Name and Password. Enter the User Name and Password assigned by the Subscriber Administrator. Passwords must use capital and lower case letters, symbols, and numbers for SSL encryption.

3.2 Main Menu Screen

From the main menu screen users can access all modules in HIPAA BASICS™. On the left portion of the screen, users can toggle between Users, Gap Analysis Project List, and Policies & Forms module.

Exhibit 3-4. Main Menu Screen

Answer	Assign	Data Collection Date	Gap ID	Rel	Edit	Report	Status
SMSInc	Subscriber Administrator	10/31/2002	DEMO GAP	1			
SMSInc	Jane Doe	12/1/2002	MTF-1	1	Edit	Report	Status

3.3 Demo Gap

This **Demo Gap** allows users to become familiar with the tool outside of an actual assessment. Each user has access to the Demo Gap every time they login to HIPAA BASICS™.

Exhibit 3-5. Demo Gap

Answer	Assign	Data Collection Date	Gap ID	Rel	Edit	Report	Status
SMSInc	Subscriber Administrator	10/31/2002	DEMO GAP	1	Edit	Report	Status

The new user may access the **Answer**, **Assign**, **Edit**, **Report**, and **Status** hyperlinks depending on the user status.

When the Subscriber Administrator adds users, each user will be assigned to a Demo Gap to practice working on assessments. The Subscriber Administrator is the Lead User of this Demo Gap. There is no Project Plan to be downloaded from the Demo Gap. If there is any New Release, the Demo Gap will be renamed as the Previous Version of the Demo Gap. Users should always practice with the New Demo prior to conducting a real assessment.

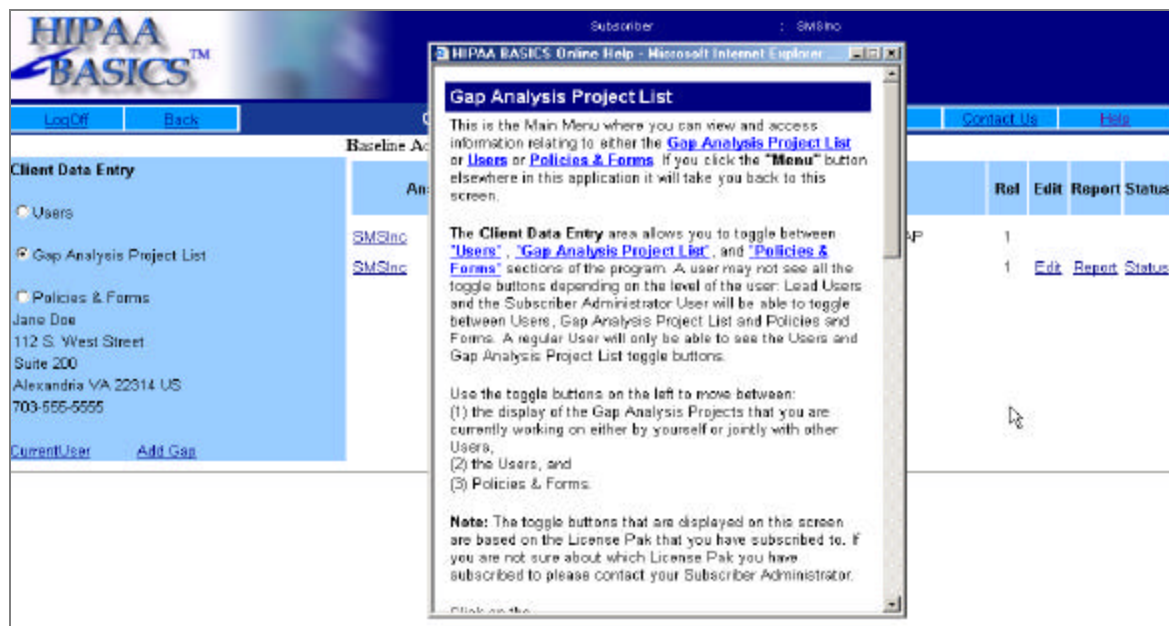
3.4 Info Page

The Info link on the Main Menu Screen provides further information to all users within the tool. Frequently Asked Questions (FAQs) may be listed, as well as other relevant HIPAA BASICS™ information. The user guide is posted on the Info page.

3.5 Help Page

Each area of HIPAA BASICS™ has a Help link that directs users to detailed help information about the current screen. Click on **Help** to access the information. The Help Screen also contains clickable links that provide further information on select topics.

Exhibit 3-6. Help Screen

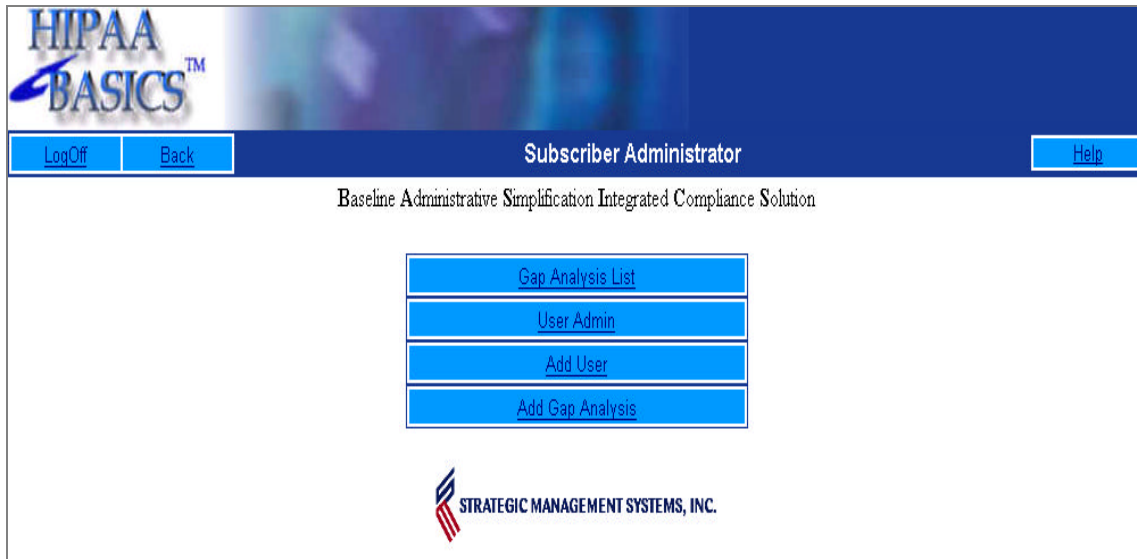


4. ADMINISTRATION

4.1 Subscriber Administration Functions

The Subscriber Administrator may generate reports on any of the gap analyses/assessments in the Subscriber account. This function should be primarily used as a back-up capability when the Lead User is unable to generate the reports for their assessments.

Exhibit 4-1. Main Admin Screen



On this Menu the Subscriber Administrator can:

- ▶ Review the **Gap Analysis List**, which provides access to all gap analysis/assessment projects currently in use within the Subscription account. The Subscriber Administrator has full privileges and can modify data, team assignments, and generate outputs. (This functionality should not be used for routine purposes, but to assist in troubleshooting or when Lead User level or User level privileges change or assistance is requested).
- ▶ Conduct **User Admin**, such as editing and modifying user accounts, changing passwords, user names, contact information, etc.
- ▶ **Add Users** within the scope of the License Pak. (Newly added users should be alerted to the fact that their accounts have been setup and their email should be verified. Passwords should not be emailed.)
- ▶ **Add Gap Analysis** projects. This functionality is not intended for routine purpose of setting up Gap Analysis Projects/Assessments. Lead Users, heading these projects, should set up their own gap analysis projects/assessments. However, they may ask for assistance. This feature can also be used for reassignments that may become necessary because employees' user privileges change.

The Subscriber Administrator level user has the highest and full privileges to all accounts and data under the Subscription Agreement. Responsibilities should be handled by professionals who follow best practices in information systems security and system administration.

Additional navigational buttons are provided for users in the Admin area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go to the Subscriber Administrator's Gap Analysis Project List by clicking on **Back**.

4.2 Gap Analysis Projects

Exhibit 4-2. Gap Analysis Project List Screen

Answer	Assignments	Data Collection Date	Gap ID	Rel	Edit	Report	Status Report	Gap Status
SMSInc	Subscriber Administrator	10/31/2002	DEMO GAP	1	Edit	Report	Status	
SMSInc	Cornelia Dorfschmid	10/31/2002	CMD-Demo	1	Edit	Report	Status	ARCHIVED
SMSInc	Jane Doe	12/1/2002	MTF-1	1	Edit	Report	Status	

This is the Gap Analysis Project List screen. Only the Subscriber Administrator can access this screen.

The screen displays a list of all the HIPAA Gap Analysis Projects for the Subscriber and gives the Subscriber Administrator a choice of:

- ▶ Viewing or entering data into a particular gap analysis/assessment by clicking the respective link under the Answer column.
- ▶ Viewing or assigning the Team of Users working on the particular gap analysis/assessment project, including assigned Requirements by clicking the links under the Assignment column. The link under the Assignment column identifies the Lead User.
- ▶ Viewing the Data Collection Date for the respective gap analysis/assessment.
- ▶ Viewing the Gap ID that identifies the gap analysis/assessment and will display on the Gap Analysis Project List.

- ▶ Clicking the **Edit** link, to edit information and details about the particular gap analysis/assessment.
- ▶ Clicking the **Report** link to see and/or download text-based Reports on different standards. This link appears only if you have Report generation capabilities.
- ▶ Clicking the **Status** link to check the status of compliance with the HIPAA standards graphically. This link appears only if you have Report rights.
- ▶ Viewing the file status of a Gap Analysis project via Gap Status.

Additional navigational buttons are provided for users in the Admin area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go to the Subscriber Administrator's Gap Analysis Project List by clicking on **Back**.

4.2.1 Adding a New Gap Analysis Project

Exhibit 4-3. Add New Gap Analysis Project Screen

This is the Add New Gap Analysis Project screen. Only Subscriber Administrator Users and Lead Users can access this screen.

Enter the Gap Analysis Project details. Items marked with an asterisk (*) are mandatory.

Choose the Lead User for the Gap Analysis Project. Choice of Lead User may be limited by the License Pak subscription.

The Date Collection Date will display on the Gap Analysis Project List. It will also appear on the Gap Analysis Report.

Information in the Notes for Client field will be displayed on top of the Gap Analysis Report. It can be used for facility names, team member lists, location codes, etc.

The Date completed will be used as the final date for the completion of the project.

The Internal Note can be used for internal notes or comments about the project. Text will not appear elsewhere.

You will get a message if the Gap is added successfully.

Click on:


- ▶ **Clear** to clear all fields.
- ▶ **New Version** to create a new version of the Gap Analysis Project.
- ▶ **Add** to add the new Gap Analysis Project
- ▶ **Archive** to archive a Gap Analysis Project.
 - This will create a MS Access file (.mdb) on the server that can be downloaded. Only Subscriber Administrator Users can see this button to edit the actual Gap Analysis. This button will not appear on the demo version. You will get a message box to reconfirm your decision. The Archived Gap will be counted toward the expiration date limit as in your subscription.
- ▶ **Remove from Server** will appear if you already archived the Gap analysis. It will allow the Subscriber Admin to remove the Gap (.mdb) file from the server. The (.mdb) file will no longer be available for download. Only Subscriber Administrator Users can see this button.

Additional navigational buttons are provided for users in the Admin area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the Subscriber Administrator's Menu by clicking on **Back**.

4.3 User Administration

Exhibit 4-4. User Admin Screen



[LogOff](#)

[Menu](#)

[Back](#)

Subscriber Users

[Help](#)

Baseline Administrative Simplification Integrated Compliance Solution

User	Level	# Gaps	City	Zip	E-Mail	Phone	Fax
Cornelia Dorfischmid	Lead User	1	Alexandria	22314	cdorfischmid@strategicm.com	703-535-1419	703-836-5255
Jane Doe	Lead User	1	Alexandria	22314	janedoe@smsincxyz.biz	703-555-5555	
John Doe	User		Alexandria	22314	johndoe@smsincxyz.biz	703-555-5555	
Subscriber Administrator	Administrator				cdorfischmid@strategicm.com		

This is the Subscriber Users screen. Only Subscriber Administrator users can access this screen.

The user can see a list of Subscriber Users along with:

- ▶ User Name
- ▶ Level
- ▶ User City
- ▶ User Zip
- ▶ User E Mail address
- ▶ User Phone
- ▶ User Fax

Click on User Name to view user details on the Current User. The Subscriber Administrator users have the right to edit the user details including a change of password.

Additional navigational buttons are provided for users in the Admin area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go to the Subscriber Administrator's Gap Analysis Project List by clicking on **Menu**. (Only available for Subscriber Administrator users.)
- ▶ Go back to the Administrators Menu by clicking on **Back**.

4.3.1 Adding New Users

Exhibit 4-5. Add New User Screen

HIPAA BASICS™

Please click on Add/Update to save changes...

[Logout](#) [Menu](#) [Back](#) **Add New User** [Help](#)

Title:

First Name: *

Middle Name:

Last Name: *

Suffix:

Display as: ☒ Full Name ☐ Last Name

Address:

City:

State:

Country:

Zip:

WWWb:

E-Mail: *

Phone:

Fax:

800:

Choose Password:

Userid: *

Password: *

Confirm Password: *

Level:

This is the Add New User Screen. Only the Subscriber Administrator can access this screen.

Enter the user details. Items marked with an asterisk (*) are mandatory.

- ▶ Choose a Title from the available options in the list.
- ▶ First Name.
- ▶ Middle Name.
- ▶ Last Name.
- ▶ Choose a Suffix from the available options in the list.
- ▶ Home page of the Subscriber User, if any, in the box next to WWWb.
- ▶ E-Mail address of the Subscriber User.
- ▶ Phone number of the Subscriber User.
- ▶ Fax number of the Subscriber User.
- ▶ Toll Free (800) number of the Subscriber user.
- ▶ “Display as” is a toggle which is used by the system to display the Subscriber user in the Reports and the lists. Currently only the default option is available.

- ▶ Address information of the Subscriber user.
 - Address lines 1 and 2
 - City
 - Choose from a list of States in the US and CANADA.
 - Country
 - Zip
- ▶ UserId
- ▶ Password (Passwords must have at least 8 characters and include numbers, upper and lower case letters, and a symbol such as "!" or "&")
- ▶ Confirm Password
- ▶ Choose the Level of the user. It is set to User (Regular User) by default. The License Pak that you or your organization has subscribed to may limit choice of Level. A Lead User level indicates rights to setup gap analysis projects/assessments, and to assemble Teams to work on these projects. Lead Users may also have reporting and project plan generation privileges. Lead Users typically also have access to Policies and Procedures templates. A Regular User level does not allow report, project plan, or policy generation.

The user can click on:

- ▶ **Add** to add the new user. A message is displayed if the user is added successfully.
- ▶ **Clear** to clear all fields.

HINT: After you have added a new user, please ensure that their email is correct and alert them by that email that their account is set up and ready for use. For security reasons, passwords should be not emailed and be communicated differently.

Additional navigational buttons are provided for users in the Admin area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go to the Subscriber Administrator's Gap Analysis Project List by clicking on **Menu**. (Only available for Subscriber Administrator users.)
- ▶ Go back to the Administrators Menu by clicking on **Back**

4.4 Interactions with TMA HIPAA Help Desk and Administrative Users

The TMA HIPAA Help Desk can be contacted by email. Click on the “Contact Us” link on the main menu or email them at hipaasupport@tma.osd.mil.

5. HIPAA BASICS™ MODULES

Exhibit 5-1. Gap Analysis Project List

Client Data Entry		Answer	Assign	Data Collection Date	Gap ID	Rel	Edit	Report	Status
<input type="radio"/> Users		SMSInc	Subscriber Administrator	10/31/2002	DEMO GAP	1			
<input checked="" type="radio"/> Gap Analysis Project List		SMSInc	Jane Doe	12/1/2002	MTF-1	1	Edit	Report	Status
<input type="radio"/> Policies & Forms									

[CurrentUser](#) [Add Gap](#)

5.1 Gap Analysis Project List

The Gap Analysis Project List Screen is the default main screen in HIPAA BASICS™. When a user logs into their user account, they will automatically be taken to the Gap Analysis Project List Screen. Each displayed row represents an assessment.

In this module, users can view and access information relating to the Gap Analysis Project List, Users, or Policies & Forms. Clicking the **Menu** button elsewhere in this application will take you back to the Gap Analysis Project List screen.

The Client Data Entry area allows you to toggle between the "Users", "Gap Analysis Project List", and "Policies & Forms" modules of the program. **A user may not see all the toggle buttons depending on the level of the user.** Lead Users and the Subscriber Administrator User will be able to toggle between Users, Gap Analysis Project List, and Policies and Forms. A Regular User will only be able to see the Users and Gap Analysis Project List toggle buttons.

The Client Data Entry area lists the contact information of the currently logged-in user.

In the **Client Data Entry** area, there are several links:

The **CurrentUser** link allows users to view information about the User Details of your account.

The **Add Gap** link is used by the Lead User to add a new Gap Analysis Project. Regular Users will not have this link.

The **Admin** link provides access to the Subscriber Administrator screen. This link appears only if you are logged in as a Subscriber Administrator.

Each row of information represents a different and distinct compliance assessment.

There are six columns of information on the Gap Analysis Project List screen:

- ▶ Answer
- ▶ Assign
- ▶ Data Collection Date
- ▶ Gap ID
- ▶ Edit
- ▶ Report
- ▶ Status

Links under **Answer** allow the user to answer a requirement and all of its related test/task items. The link displays the name of the Subscribing Organization.

Links under **Assign** allow the Lead User to assign Requirements to users and view the status of the test/task items related to those Requirements. Regular Users can view who has been assigned to a Requirement. The link displays the name of the Lead User who owns the gap analysis/assessment.

Data Collection Date is entered by the Lead User when a new gap analysis/assessment is setup. It indicates the starting calendar date of the gap analysis/assessment.

Gap ID is entered by the Lead User when setting up a new gap analysis/assessment. Each Gap ID should be unique, and allow all users to quickly distinguish between the gap analyses/assessments. The Gap ID can be a facility name, location, department, HIPAA Rule, etc. It must clearly identify the area being assessed. The Gap ID name should NOT use commas, slashes, dashes, etc.

HINT: Gap ID's can be changed by the Lead User who owns the gap analysis/assessment; however, assessments cannot be deleted once they are created. Also note, that a particular gap analysis/assessment cannot be transferred from one Lead User to another.

Links under **Edit** can only be viewed by the Lead User who owns the gap analysis/assessment. The Edit screen allows the Lead User to enter data about the gap analysis/assessment, as well as generate the project plan for the gap analysis/assessment, and reassign user assignments within a gap analysis/assessment. Only Lead Users and the Subscriber Administrator have the capability to edit information about a gap analysis/assessment or generate a project plan.

Links under **Report** can only be viewed by the Lead User who owns the gap analysis / assessment. The Report screen allows the Lead User to generate reports. Only Lead Users and the Subscriber Administrator have the capability to create a report.

Links under Status can only be viewed by the Lead User who owns the gap analysis / assessment. The Status screen allows the Lead User to create a graphical status report about the gap analysis/assessment. Only Lead Users and Subscriber Administrators can create these reports.

The Gap Analysis Project List Module also contains navigational tools:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the previous screen by clicking on **Back**.
- ▶ Go to the Contact Us form by clicking on **Contact Us**.
- ▶ Go to the Info page by clicking on **Info**.
- ▶ Go to the Help Screen by clicking on **Help**.

5.2 Users

Exhibit 5-2. Users Screen – User Team by Gap ID

Subscriber : SMSInc

LogOff Menu Back Users Help

Baseline Administrative Simplification Integrated Compliance Solution

User	Zip	E-Mail	Phone	800 #
Subscriber Administrator		cdorfschmid@strategicm.com		
Cornelia Dorfschmid	22314	cdorfschmid@strategicm.com	703-535-1419	
John Doe	22314	johndoe@smsincxyz.biz	703-555-5555	

Client Data Entry

- ☒ Users
- ☐ Gap Analysis Project List
- ☐ Policies & Forms

Jane Doe
112 S. West Street
Suite 200
Alexandria VA 22314 US
703-555-5555

[CurrentUser](#)

The Users screen displays the following Information:

- ▶ The Zip column lists the zip codes of all users.
- ▶ The E-Mail column lists the email address of all users.
- ▶ The Phone 800# column lists the contact phone number of all users.

Clicking on the [CurrentUser](#) link allows users to view information about the User Details of your account

The "Admin" link takes you to the Subscriber Administrator screen. This link appears only if you are logged in as a Subscriber Administrator.

Under the User column, you see a list of all users of any level working with you.

Exhibit 5-3. Users Screen Shot – User Team by Gap ID

The screenshot shows the HIPAA BASICS™ Users Screen. At the top, there is a navigation bar with buttons for [LogOff](#), [Menu](#), [Back](#), and [Help](#). Below this is a table titled "User List" with the following columns: Title, User Team, Data Collection Date, Report Date, and Gap ID. The table contains five rows of user data. To the left of the table is a sidebar with various input fields and labels for user details.

Title	User Team	Data Collection Date	Report Date	Gap ID
	Subscriber Administrator	10/31/2002		DEMO GAP
First Name	Cornelia Dorfeschmid	10/31/2002		DEMO GAP
Subscriber	Jane Doe	10/31/2002		DEMO GAP
Middle Name	John Doe	10/31/2002		DEMO GAP
Last Name	Cornelia Dorfeschmid	10/31/2002		CMD-Demo
Administrator	Subscriber Administrator	10/31/2002		CMD-Demo

The sidebar on the left contains the following fields:

- Suffix
- Client Org. Name
- SMSInc
- Address
- City
- State
- Zip
- Country

You may click on the user's name to see additional details about a user beyond what is displayed on the screen. This includes information about the user, such as address, phone number, and email, as well as a listing of all the gap analyses/assessments that the user is involved in.

The Users module also contains navigational tools:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the previous screen by clicking on **Back**.
- ▶ Go back to the Gap Analysis Project List by clicking on **Menu**.

5.3 Policies and Forms

Exhibit 5-4. Policies and Forms

HIPAA BASICS™ Subscriber: SMInc

Log Off Back Policies and Forms Help

Baseline Administrative Simplification Integrated Compliance Solution

Client Data Entry

- Users
- Gap Analysis Project List
- Policies & Forms**

Jane Doe
112 S. West Street
Suite 200
Alexandria VA 22314 US
703-555-5555

[CurrentUser](#)

HIPAA Rule Category

Standards for the Privacy of Individually Identifiable Health Information

Policy or Form Name	Description	PDF	Text	Requirement
Verification of Entities Requesting Use or Disclosure of Protected Health Information	Verification for Requesting PHI	P-001-01.pdf	P-001-01.txt	100
Identifying when Routine Health Information Becomes Protected Health Information	Identifying PHI	P-002-01.pdf	P-002-01.txt	112
Disclosing and Requesting only the Minimum Amount of Protected Health Information Necessary	Disclosure of Minimum PHI Necessary	P-003-01.pdf	P-003-01.txt	113
Creating De-Identified Information	Creating De-Identified Information	P-004-01.pdf	P-004-01.txt	114
Obtaining Individual Consent For Providers and Plans	Obtaining Consent	P-005-01.pdf	P-005-01.txt	116
Resolving Conflicting Consents and Authorizations	Resolving Conflict	P-006-01.pdf	P-006-01.txt	117
Disclosing Protected Health Information for Judicial and Administration Release	Judicial & Administration Release	P-007-01.pdf	P-007-01.txt	118
Disclosing Protected Health Information for Health Oversight	Disclosure for Health Oversight	P-008-01.pdf	P-008-01.txt	119

Lead Users have access to the Policies & Forms component of the software.

A selection for viewing Policies and Forms can be made by selecting the HIPAA Rule or Category and choosing the appropriate item on the drop down list. All Policies and Forms are categorized by HIPAA Rule, (e.g., Privacy) and Project Category (e.g., Individual Rights).

Exhibit 5-5. Policies and Forms – by HIPAA Rule

HIPAA BASICS™ Subscriber: SMInc

Log Off Back Policies and Forms Help

Baseline Administrative Simplification Integrated Compliance Solution

Client Data Entry

- Users
- Gap Analysis Project List
- Policies & Forms**

Jane Doe
112 S. West Street
Suite 200
Alexandria VA 22314 US
703-555-5555

[CurrentUser](#)

HIPAA Rule Category

Standards for the Privacy of Individually Identifiable Health Information

- Standards for Electronic Transactions and Code Sets
- National Standard Health Care Provider Identifier
- Security and Electronic Signature Standards
- Standards for the Privacy of Individually Identifiable Health Information**
- National Standard Employer Identifier
- National Standard Health Plan Identifier
- Information Becomes Protected Health Information

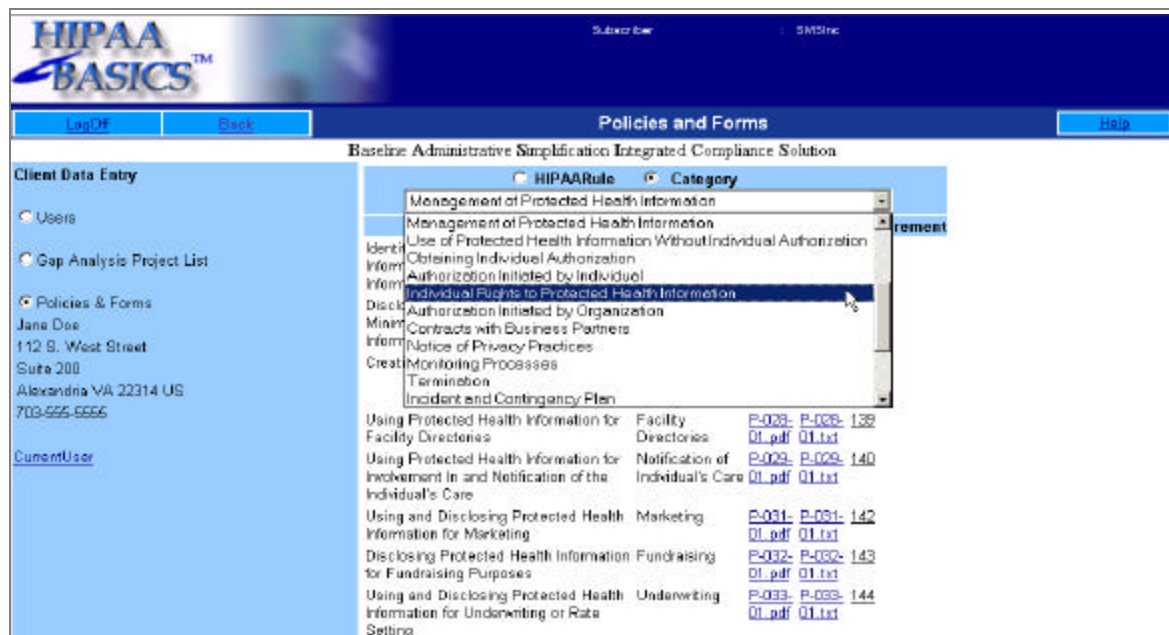
Policy or Form Name	Description	PDF	Text	Requirement
Verification of Entities Requesting Use or Disclosure of Protected Health Information	Verification for Requesting PHI	P-001-01.pdf	P-001-01.txt	100
Identifying when Routine Health Information Becomes Protected Health Information	Identifying PHI	P-002-01.pdf	P-002-01.txt	112
Disclosing and Requesting only the Minimum Amount of Protected Health Information Necessary	Disclosure of Minimum PHI Necessary	P-003-01.pdf	P-003-01.txt	113
Creating De-Identified Information	Creating De-Identified Information	P-004-01.pdf	P-004-01.txt	114
Obtaining Individual Consent For Providers and Plans	Obtaining Consent	P-005-01.pdf	P-005-01.txt	116
Resolving Conflicting Consents and Authorizations	Resolving Conflict	P-006-01.pdf	P-006-01.txt	117
Disclosing Protected Health Information for Judicial and Administration Release	Judicial & Administration Release	P-007-01.pdf	P-007-01.txt	118
Disclosing Protected Health Information for Health Oversight	Disclosure for Health Oversight	P-008-01.pdf	P-008-01.txt	119

HIPAA Rule represents the regulations and implementation specifications of HIPAA Administrative Simplification, including:

- ▶ Standards for Transactions and Code Sets;
- ▶ National Provider Identifier and Plan Identifier;
- ▶ National Employer Identifier;
- ▶ Security and Electronic Signature Standards; and
- ▶ Standards for Privacy of Individually Identifiable Health Information.

Only the Subscriber Administrator and Lead Users can access the Policies and Forms area.

Exhibit 5-6. Policies and Forms – by Category



Category is a project category. Each Requirement with all its associated Test/Task Items is grouped under one Category only. This is a proprietary classification and designed to help filter and also facilitate gap analysis/assessment data entry. The HIPAA BASICS™ project plan uses these same categories.

The Policies and Forms that you selected for further review are listed under the column “Policy or Form Name”.

The “Description” column provides a short description of the policy.

The column titled “PDF” provides a link to the policy or form in PDF version. The PDF file name for the policy/form uses the format P-nnn-vv.pdf, where nnn stands for the policy/form number and vv for the version number.

To view the PDF version before downloading the file, click on the PDF link and follow the directions to download the file. To download a PDF version of the Policy/Form without viewing the file first, right click on the desired policy link under the PDF column and then click on Save as and specify a file/folder location on your computer.

The “Text” column provides a link to the text version of the policy/form in P-*nnn*-*vv*.txt format, where *nnn* stands for the policy/form number and *vv* for the version number.

To view the Text version before downloading the file, click on the text link and follow the directions to download the file. To download a Text version of the Policy/Form, right click on the desired policy under the Text column and click on Save as and specify a file/folder location on your computer.

The “Requirement” column lists the Requirement numbers which apply to the policy or form. To view the text of the Requirement, i.e., the HIPAA standard, move the mouse over the highlighted number and a pop-up screen will display the Requirement identified by that number. Please remember that these integer numbers are proprietary and idiosyncratic to HIPAA BASICS™ and do not refer to any numbering/paragraphs in the regulation text or HIPAA statute.

Use the toggle buttons in the Client Data Entry area to move between:

- (1) the display of the Gap Analysis Project List with gap analyses that you are currently working on either by yourself or jointly with other users,
- (2) the Users, and
- (3) Policies & Forms

6. SETTING UP ASSIGNMENTS

6.1 Gap Analysis Setup

Click on **Add Gap** on the Gap Analysis Project List screen to add a new gap analysis/assessment. Only the Lead User has access to the **Add Gap** link in HIPAA BASICS™.

Exhibit 6-1. Edit Gap Analysis Screen

The screenshot shows the 'Edit Gap Analysis' screen. The header includes the HIPAA BASICS logo and a navigation bar with 'LogOff', 'Back', 'Edit Gap Analysis', and 'Help' buttons. A message says 'Please click on Add/Update to save changes...'. The main form area has the following fields: 'Data Collection Date' (12/1/2002), 'Target Completion' (empty), 'Project Start' (empty), 'Gap ID' (MTF-1), 'Gap Active' (checked), 'Date Completed' (1/31/2003), 'Notes for Client' (text area), and 'Internal' (text area). The bottom bar contains 'Project Plan', 'Reassign User Assignments', and 'Update' buttons.

The Edit Gap Analysis Screen can only be accessed by the Subscriber Administrator and Lead Users.

The Lead User field will display the Lead User's name by default.

Data Collection Date will display on the Gap Analysis Project List. It will also appear on the Gap Analysis/Assessment Report. This is an optional field that allows the Lead User to input a start date for the gap analysis/assessment.

The Target Completion Date is an optional field for the Lead User to enter the proposed date for the completion of the project.

The Project Start Date will be used as a start date for the Project Management Plan. This date is entered before downloading the project plan from HIPAA BASICS™.

The Gap ID identifies the gap analysis/assessment, and will display on the Gap Analysis Project List. The Gap ID can be a number, name, facility ID, etc.

The Gap Active box indicates active or inactive status of the gap analysis/assessment.

- ▶ When a checkmark appears in the box, the gap analysis/assessment is active for data entry and editing by assigned Team members is allowed. Once the Gap Active is set to inactive (locked), the gap project will be displayed only.
- ▶ The purpose of the Active/Inactive data box is to allow/disallow editing on the gap analysis/assessment. The gap analysis/assessment remains unaltered if set to Inactive. Typically this is done by a Lead User when he/she is ready to print a final Report and generate a final Project Management Plan.
- ▶ The Lead User can reactivate the Gap and allow editing by setting it to Active (unlocked).

HINT: The Lead User may also delete all Team members from the gap analysis/assessment to ensure that nobody can alter the data after data collection is final.

The Date Completed can be used as the final date for the completion of the Project.

The Notes for Client field can be used for any text. It will appear on top of the printed Gap Analysis Report. For example, a facility name or team members or location may be entered.

The Internal Note is a field to record notes or comments about this project. It will not be integrated in any report or plan.

Click on:

- ▶ **Update** for any change to take effect.
- ▶ **Project Plan** and follow instructions to generate a Project Management Plan.
- ▶ **Reassign User Assignments** to reassign Team Members, i.e., transfer the assigned Requirements and subsidiary Tasks from one team member to another.

Additional navigational buttons are provided for users in the Edit Gap Analysis area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the Gap analysis Project List by clicking on **Menu**.

6.2 Assigning Users

After setting up a new gap analysis/assessment, the Lead User must add team members to the gap analysis/assessment, and assign Requirements to those users. Only the Lead User and the Subscriber Administrator can add users to a gap analysis/assessment.

Exhibit 6-2. Assigning New Users

Subscriber : SMSInc

Log Off Back Gap Analysis Project List Info Contact Us Help

Baseline Administrative Simplification Integrated Compliance Solution

Client Data Entry	Answer	Assign	Data Collection Date	Gap ID	Rel	Edit	Report	Status
<input type="radio"/> Users <input checked="" type="radio"/> Gap Analysis Project List <input type="radio"/> Policies & Forms Jane Doe 112 S. West Street Suite 200 Alexandria VA 22314 US 703-555-5555 Current User Add Gap	SMSInc	Subscriber Administrator	10/31/2002	DEMO GAP	1			
	SMSInc	Jane Doe	12/1/2002	MTF-1	1	Edit	Report	Status

Links under **Assign** on the Gap Analysis Project List page allow Lead Users to assign Requirements to users.

HINT: Links under the Assign column display the name of the Lead User who owns the gap analysis/assessment. Only the Lead User who owns the gap analysis/assessment can add team members.

Exhibit 6-3. Assign Requirements Screen

Subscriber : SMSInc
Data Collection Date : 12/1/2002
Project Start :
Gap ID : MTF-1 (RELEASE 1)
Lead User : Jane Doe
Target Completion :

Please click on Add/Update to save changes...

[Log Off](#) [Menu](#) **Assign Requirements** [Team Assigned](#) [Help](#)

☒ HIPAA Rule
 ☐ Functional Area
 ☐ Category

HIPAA Rule: Standards for Electronic Transactions and Code Sets

Req #	Requirement Question	Assigned to	Complete	Does Not Apply	Not Answered	Not Complete	Total
1	Utilizing the "ASC X12N 837 - Health Care Claim; Institutional Volumes 1 and 2, Version 4010" standard for transactions used to submit institutional health care claims and/or encounter information.	Jane Doe			20		20
2	Utilizing the "ASC X12N 837 - Health Care Claim; Professional Volumes 1 and 2, Version 4010" standard for transactions used to submit professional health care claims and/or encounter information.	Jane Doe			20		20
3	Utilizing the "ASC X12N 837 - Health Care Claim; Dental Version 4010" standard for transactions used to submit dental health care claims and/or encounter information.	Jane Doe			20		20
4	Utilizing the "ASC X12N 835 - Health Care Claim Payment/Advice Version 4010" standard for transactions used to make a payment, information about the transfer of funds, and payment processing information to a financial institution for a health care provider.	Jane Doe			20		20
5	Utilizing the "ASC X12N 835 - Health Care Payment/Advice Version 4010" standard for transactions used to send a remittance advice directly to a health care provider (sending data only).	Jane Doe			20		20
6	Utilizing the "ASC X12N 835 - Health Care Payment/Advice Version 4010" standard for transactions used to make payment and send an explanation of benefits to a health care provider via a financial institution.	Jane Doe			20		20
7	Utilizing the "ASC X12N 837 - Health Care Claim; Institutional Volumes 1 and 2, Version 4010" standard for transactions used to transmit coordination of benefit information to a health plan for the purpose of determining the relative payment responsibilities of the health plan of (a) institutional claims; (b) payment information.	Jane Doe			20		20

Clicking on the link under **Assign** brings the Lead User to the Assign Requirements area. From here, click on **Team Assigned** to add users to the gap analysis/assessment.

Exhibit 6-4. Adding Users through Team Assigned Screen

Subscriber : SMSInc
Data Collection Date : 12/1/2002
Project Start :
Gap ID : MTF-1 (RELEASE 1)
Lead User : Jane Doe
Target Completion :

Please click on Add/Update to save changes...

[Log Off](#) [Menu](#) **Team Assigned** [Assign Requirement](#) [Help](#)

Lead User: Jane Doe

Team Members

Users

☐ Jane Doe

☐

[Save](#) [Cancel](#)

This is the Team Assigned screen. The Subscriber Administrator, Lead User, and Regular User can access this screen. However, the Subscriber Administrator and Lead User are the only users authorized to add or delete members from a team. A Regular User can see the team members but cannot update data using this screen.

A Subscriber Administrator or a Lead User can create a Team of Users using this screen. The purpose of the Team of Users is to view or work together on a gap analysis / assessment. Each gap analysis/assessment has its own team. The default team assignment is always the Lead User who has setup the gap analysis. The Lead User must add on additional users to the team in order to assign requirements.

HINT: Lead Users can assign a user to a team without providing them with assignments. These users then have a view-only functionality, and cannot make changes to any of the Requirements or their tasks.

Click on:

- ▶ **Add** to add a new team member to the gap analysis project. The screen then allows you to select a user from a new drop down box.
- ▶ Click on **Save** to add the team member.
- ▶ Click **Cancel** to skip and not add the new team member.

HINT: You can add one particular user to the team of a gap analysis/assessment only once. You can add the same user to another gap analysis/assessment, as long as you are the Lead User for that particular gap analysis/assessment or the Subscriber Administrator.

- ▶ **Delete** to delete a team member from the gap analysis/assessment by checking the box next to the team member's name. The Requirements assigned to the team member being deleted from the team are assigned back to the Lead User. You cannot delete the Lead User/owner of a gap analysis from the team.

Additional navigational buttons are provided for users in the Team Assigned area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the Gap Analysis Project List by clicking on **Menu**.
- ▶ Go to the Assign Requirements screen by clicking on **AssignRequirement**.

6.3 Assigning Requirements

Now that a team of users has been assigned to the gap analysis/assessment, the users can be assigned Requirements.

Clicking on the link under **Assign** brings the Lead User to the Assign Requirements area. On the Assign Requirements screen, the Subscriber Administrator and Lead User can make Requirement assignments to all users on the particular gap analysis/assessment. Regular users can view who has been assigned to a specific Requirement, but cannot change the assignment.

HINT: Use the Privacy Requirements List and other supporting documents issued to TMA in November 2002 to identify the Privacy Requirements and their Functional Areas. Contact the TMA HIPAA Help Desk or your Privacy Officer for a copy.

Exhibit 6-5. Lead Users – Assigning Requirements

The screenshot displays the 'Assign Requirements' interface. At the top, there's a header with the 'HIPAA BASICS™' logo and a status bar showing 'Subscriber: [blank]', 'Collection Date: 12/1/2002', 'Project Start: [blank]', 'Gap ID: MTF-1 (RELEASE 1)', 'Lead User: Jane Doe', and 'Target Completion: [blank]'. Below the header, there's a navigation bar with 'Log Off', 'Menu', and 'Assign Requirements' (highlighted). A 'Team Assigned' button is also visible. The main area features a table with the following columns: Req #, Requirement Question, Assigned to, Complete, Does Not Apply, Not Answered, Not Complete, and Total. The table lists seven requirements, all of which are assigned to 'Jane Doe'. The 'Complete' column for all rows is empty, while 'Does Not Apply' and 'Not Answered' have values of 20. The 'Total' column shows 20 for each requirement.

Req #	Requirement Question	Assigned to	Complete	Does Not Apply	Not Answered	Not Complete	Total
1	Utilizing the "ASC X12N 837 - Health Care Claim: Institutional Volumes 1 and 2, Version 4010" standard for transactions used to submit institutional health care claims and/or encounter information.	Jane Doe		20			20
2	Utilizing the "ASC X12N 837 - Health Care Claim: Professional Volumes 1 and 2, Version 4010" standard for transactions used to submit professional health care claims and/or encounter information.	Jane Doe		20			20
3	Utilizing the "ASC X12N 837 - Health Care Claim: Dental Version 4010" standard for transactions used to submit dental health care claims and/or encounter information.	Jane Doe		20			20
4	Utilizing the "ASC X12N 835 - Health Care Claim Payment/Advice Version 4010" standard for transactions used to make a payment, information about the transfer of funds, and payment processing information to a financial institution for a health care provider.	Jane Doe		20			20
5	Utilizing the "ASC X12N 835 - Health Care Payment/Advice Version 4010" standard for transactions used to send a remittance advice directly to a health care provider (sending data only).	Jane Doe		20			20
6	Utilizing the "ASC X12N 835 - Health Care Payment/Advice Version 4010" standard for transactions used to make payment and send an explanation of benefits to a health care provider via a financial institution.	Jane Doe		20			20
7	Utilizing the "ASC X12N 837 - Health Care Claim: Institutional Volumes 1 and 2, Version 4010" standard for transactions used to transmit coordination of benefit information to a health plan for the purpose of determining the relative payment responsibilities of the health plan of (a) institutional claims; (b) payment information.	Jane Doe		20			20

To assign a Requirement to a team member, simply choose the member's name in the corresponding Requirement row(s) under the Assigned to column and click on **Update**. **Update** must be pressed in order for any change to take affect. A Regular User can just see the assignments and cannot update data using this screen.

The assignment of Requirements can be facilitated by choosing to sort the Requirements by HIPAA Rule, Functional Area, or Category.

All Requirements are categorized by HIPAA Rule, (e.g., Privacy), Project Category (e.g., Individual Rights), and Functional Area (e.g., Billing and Reimbursement).

The user can see the following information on the Assign Requirements screen:

- ▶ “Req#”, which identifies the number of a particular Requirement.
- ▶ The requirements listed under the “Requirement Question” column.
- ▶ The assigned users under the “Assigned to” column.
- ▶ Details of the Requirement Test/task status in the following five columns on the right:
 - Completed
 - Does Not Apply
 - Not-Answered
 - Not-Complete
 - Total.

Additional navigational buttons are provided for users in the Assign Requirement area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the Gap Analysis Project List screen by clicking on **Menu**.
- ▶ Go to the Team Assigned screen by clicking on **TeamAssigned**.

6.4 Reassigning User Assignments

The Subscriber Administrator and Lead User can reassign user assignments within a gap analysis/assessment.

Exhibit 6-6. Lead User – Reassigning User Assignments

Subscriber : SMSInc

Log Off Back Gap Analysis Project List Info Contact Us Help

Baseline Administrative Simplification Integrated Compliance Solution

Client Data Entry	Answer	Assign	Data Collection Date	Gap ID	Rel	Edit	Report	Status
Users	SMSInc	Subscriber Administrator	10/31/2002	DEMO GAP	1			
Gap Analysis Project List	SMSInc	Jane Doe	12/1/2002	MTF-1	1	Edit	Report	Status

Policies & Forms
Jane Doe
112 S. West Street
Suite 200
Alexandria VA 22314 US
703-555-5555

CurrentUser Add Gap

Click on **Edit** on the Gap Analysis Project List screen. On the Edit Gap Analysis screen, click **Reassign User Assignments**.

Exhibit 6-7. Lead User - Edit Gap Analysis and User Assignments

Log Off Back Edit Gap Analysis Help

Please click on Add/Update to save changes...

Data Collection Date: 12/1/2002

Target Completion:

Project Start:

Gap ID: MTF-1

Gap Active: ☒

Date Completed: 1/31/2003

Notes for Client:

Internal:

Project Plan Reassign User Assignments Update

Requirements can be reassigned from one user to another user on the gap analysis / assessment by selecting the name of the user to reassign Requirements from in the “From” drop-down box, and selecting the name of the user being assigned the Requirements in the “To” drop down box.

Exhibit 6-8. Lead User – Reassigning User Assignments Completed

The screenshot displays the 'Reassign User Assignments' interface. At the top left is the 'HIPAA BASICS™' logo. A navigation bar contains 'Log Off', 'Menu', 'Back', and 'Help' buttons. The main title 'Reassign User Assignments' is centered. Below it, the 'Lead User: Jane Doe' is identified. Instructions state: 'From the dropdown boxes below, select the Team Members to reassign the Requirements.' Two dropdown menus are shown: 'From' (currently showing 'Jane Doe') and 'To' (currently empty). At the bottom, there are two buttons: 'Add Team Member' and 'Reassign Assignments'.

Click **Reassign Assignments** to reassign ALL the Requirements that belong to a user to the new user.

Individual Requirements can be reassigned using the Assign Requirements screen. To reassign a Requirement to a team member, simply choose the member's name that is the corresponding Requirement row(s) under the Assigned to column and click on **Update**.

6.5 Deleting a User from a Team

Subscriber Administrators and Lead Users can delete users from a gap analysis / assessment.

From the Gap Analysis Project List screen, click on the links under **Assign** to access the Assign Requirements screen. From the Assign Requirements screen, click on the **Team Assigned** button.

Exhibit 6-9. Lead User – Deleting users from gap analysis

Subscriber : SMSInc
Data Collection Date : 12/1/2002
Project Start :
Gap ID : MTF-1 (RELEASE)
Lead User : Jane Doe
Target Completion :

Please click on Add/Update to save changes...

[LogOff](#) [Menu](#) **Team Assigned** [AssignRequirement](#) [Help](#)

Lead User: Jane Doe

Team Members

Users

☐ Jane Doe

[Add](#) [Delete](#)

To delete a user from the team, place a check mark in the box next to the user to be deleted. Click **Delete**, and then click **Update** to save the change.

HINT: If a user is deleted from a gap analysis/assessment without reassigning their Requirements first, all of the assignments will revert back to the Lead User.

6.6 Viewing User Assignments

Users of all levels can view who is assigned to a requirement in two ways:

- Viewing the Assign Requirements screen
- Viewing the actual Requirements themselves

Only the Subscriber Administrator and the Lead User who owns the gap analysis/assessment can assign or reassign users to a Requirement.

HINT: Update buttons only appear on Requirements that are assigned to the currently logged-in user. If you do not see an update button, you are not assigned to the Requirement.

7. DEFINING TASKS AND REQUIREMENTS

7.1 Accessing the Answer Requirements Screen

From the Gap Analysis Project List screen, click on the links under the **Answer** column to answer the Requirements and their related test/task items.

Exhibit 7-1. Gap Analysis Project List Screen

Subscriber : SMSInc

Gap Analysis Project List Info Contact Us Help

Baseline Administrative Simplification Integrated Compliance Solution

Client Data Entry	Answer	Assign	Data Collection Date	Gap ID	Rel	Edit	Report	Status
<input type="radio"/> Users <input checked="" type="radio"/> Gap Analysis Project List <input type="radio"/> Policies & Forms Jane Doe 112 S. West Street Suite 200 Alexandria VA 22314 US 703-555-5555 CurrentUser Add Gap	SMSInc	Subscriber Administrator	10/31/2002	DEMO GAP	1			
	SMSInc	Jane Doe	12/1/2002	MTF-1	1	Edit	Report	Status

The links listed under the **Answer** column each represent a different gap analysis / assessment. The link reflects the name of the Subscriber organization (MTF).

Exhibit 7-2. Requirements and Gap Answers Screen

The screenshot displays the 'Requirements and Gap Answers' screen. At the top, there's a header with the HIPAA BASICS™ logo and system information: Subscriber Data Collection Date, Project Start, Gap ID, Last User, Target Completion, and a version/release indicator (MTH.1 (RELEASE 1)). Below the header, there are navigation buttons: 'Load', 'Menu', 'Back', and 'Help'. The main area has tabs for 'HIPAA Rule', 'Functional Area', and 'Category'. A dropdown menu shows 'Standards for Electronic Transactions and Code Sets'. To the right, an 'Assigned to' dropdown is set to 'All Users'. The main table lists requirements with a '#' column for numbering. Requirement 1 is bolded. The table content is as follows:

#	Requirement Question
1	Utilizing the "ASC X12N 837 - Health Care Claim Institutional Volumes 1 and 2, Version 4010" standard for transactions used to submit institutional health care claims and/or encounter information.
2	Utilizing the "ASC X12N 837 - Health Care Claim Professional Volumes 1 and 2, Version 4010" standard for transactions used to submit professional health care claims and/or encounter information.
3	Utilizing the "ASC X12N 837 - Health Care Claim Dental Version 4010" standard for transactions used to submit dental health care claims and/or encounter information.
4	Utilizing the "ASC X12N 835 - Health Care Claim Payment/Advice Version 4010" standard for transactions used to make a payment, information about the transfer of funds, and payment processing information to a financial institution for a health care provider.
5	Utilizing the "ASC X12N 835 - Health Care Payment/Advice Version 4010" standard for transactions used to send a remittance advice directly to a health care provider (sending data only).
6	Utilizing the "ASC X12N 835 - Health Care Payment/Advice Version 4010" standard for transactions used to make payment and send an explanation of benefits to a health care provider via a financial institution.
7	Utilizing the "ASC X12N 837 - Health Care Claim Institutional Volumes 1 and 2, Version 4010" standard for transactions used to transmit coordination of benefit information to a health plan for the purpose of determining the relative payment responsibilities of the health plan of (a) institutional claims; (b) payment information.
8	Utilizing the "ASC X12N 837 - Health Care Claim Professional Volumes 1 and 2, Version 4010" standard for transactions used to transmit coordination of benefit information to a health plan for the purpose of determining the relative payment responsibilities of the health plan of (a) professional claims; (b) payment information.
9	Utilizing the "ASC X12N 837 - Health Care Claim Dental Version 4010" standard for transactions used to transmit coordination of benefit information to a health plan for the purpose of determining the relative payment responsibilities of the health plan of (a) dental claims; (b) payment information.
10	Utilizing the "ASC X12N 276/277 - Health Care Claim Status Request and Response Version 4010" standard for transactions used to inquire to determine or a response about the status of a health care claim.
11	Utilizing the "ASC X12 834 - Benefit Enrollment and Maintenance Version 4010" standard for transactions used to establish communication between the sponsor of a health benefit and the health plan.

A Requirement represents a Standard of the HIPAA Administrative Simplification Regulations. The Requirement is further broken down into a set of Requirement Test/Task items that are more manageable and illustrate the implementation issues associated with this Requirement. Non-Compliance with these Test/Task Items creates a gap. The exact number of Requirements depends on the Version or Release of HIPAA BASICS™. There are approximately 220-230 Requirements per Version in the system. Each Requirement has up to 20 Test Items.

The number under the "#" column identifies the number of a particular Requirement. If the number is in bold, the Requirement for that Gap Analysis Project is assigned to you and you may answer the Test/Task Items and enter data.

There are two methods of finding the Requirements that are assigned to a user:

- ▶ All Requirement numbers in bold type are assigned to the currently logged-in user. This means that the user can answer and change the Requirement.
- ▶ Users can also filter by the "Assigned to" drop-down box to view what is assigned. This feature lets you further filter the Requirement Questions by a user that is assigned to the Gap Analysis. If you select "All Users" the entire list of Requirements for a HIPAA Rule, Category, or Functional Area is displayed.

7.2 Filtering Requirements

On the Requirements and Gap Answers screen you can select the set of Requirements you wish to address. The Requirements selected for further review and answering are listed under the column "Requirement Question". You may click on the Requirement Question link to see further details.

Exhibit 7-3. Requirements and Gap Answers Screen – Filters

Requirement Number	Requirement Question
1	Utilizing the "ASC X12N837 - Health Care Claim, Dental Version 4010" standard for transactions used to submit dental health care claims and/or encounter information.
2	Utilizing the "ASC X12N835 - Health Care Claim Payment/Advice Version 4010" standard for transactions used to make a payment, information about the transfer of funds, and payment processing information to a financial institution for a health care provider.
3	Utilizing the "ASC X12N835 - Health Care Payment/Advice Version 4010" standard for transactions used to send a remittance advice directly to a health care provider (sending data only).
4	Utilizing the "ASC X12N835 - Health Care Payment/Advice Version 4010" standard for transactions used to make payment and send an explanation of benefits to a health care provider via a financial institution.
5	Utilizing the "ASC X12N837 - Health Care Claim, Institutional Volumes 1 and 2, Version 4010" standard for transactions used to transmit coordination of benefit information to a health plan for the purpose of determining the relative payment responsibilities of the health plan of (a) institutional claims; (b) payment information.
6	Utilizing the "ASC X12N837 - Health Care Claim, Professional Volumes 1 and 2, Version 4010" standard for transactions used to transmit coordination of benefit information to a health plan for the purpose of determining the relative payment responsibilities of the health plan of (a) professional claims; (b) payment information.
7	Utilizing the "ASC X12N837 - Health Care Claim, Dental Version 4010" standard for transactions used to transmit coordination of benefit information to a health plan for the purpose of determining the relative payment responsibilities of the health plan of (a) dental claims; (b) payment information.
8	Utilizing the "ASC X12N276/277 - Health Care Claim Status Request and Response Version 4010" standard for transactions used to inquire to determine or a response about the status of a health care claim.
9	
10	

Selection for the viewing or answering of Requirements can be done by toggling between HIPAA Rule, Functional Area, and Category and choosing the appropriate item on the drop down list. The selection can be further filtered by the user that is assigned to the Requirement for that gap analysis/assessment.

To filter the Requirements choose the appropriate user from the "Assigned to" drop down list. All Requirements are categorized by HIPAA Rule, (e.g., Privacy), Project Category (e.g., Individual Rights), and Functional Area (e.g., Billing and Reimbursement).

HIPAA Rule represent the regulations and implementation specifications of HIPAA Administrative Simplification, including: Standards for Transactions and Code Sets; National Provider Identifier and Plan Identifier; National Employer Identifier; Security and Electronic Signature Standards; and Standards for Privacy of Individually Identifiable Health Information.

Functional Area is an area within an organization that HIPAA BASICS™ suggests as being knowledgeable or responsible for addressing and resolving compliance with a Requirement. This is a proprietary classification and may not exactly correspond to your organization but may help filter and conduct data entry. The HIPAA BASICS™ project plan uses these same Functional Areas as defaults.

Category is a project category. Each Requirement with all its associated Test Items is grouped under one Category only. This is a proprietary classification and designed to help filter and conduct data entry. The HIPAA BASICS™ project plan uses these same Categories.

Additional navigational buttons are provided for users in the Requirements and Gap Answers area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the Gap Analysis Project List by clicking on **Menu**.
- ▶ Go back to the Gap Analysis Project List by clicking on **Back**.

7.3 Answering a Requirement and its Test/Task Items

Exhibit 7-4. Requirement Tasks Screen

HIPAA BASICS™

Subscriber: Data Collection Date: 12/1/2002
Project Start: MTF-1 (RELEASE 1)
Gap ID: JUNE 06
Lead User: Target Completion:

Please click on Add/Update to save changes...

Requirement Tasks

HIPAA Rule Standards for the Privacy of Individually Identifiable Health Information
Functional Area Human Resources
Project Category Management Personnel
Requirement Question 49. Documented policies and procedures for formally designating a person as the official who will be responsible for the development and implementation of policies and procedures regarding the privacy of individual health information.
Regulatory Authority HIPAA provisions require covered entities to designate an employee or other person to serve as the official responsible for the development of policies and procedures for the use and disclosure of protected health information. The designation of an official would focus the responsibility for development of privacy policy. [§ 164.530(a)]
Requirement Intro The organization should designate a management level employee who will oversee the development, implementation, and management of activities ensuring the privacy of individual health information.

Assigned to: Jane Doe

☐ All Complete/Not-Complete ☐ All Applicable/Not Applicable

ID	Status	Requirement Test	Applicability
49.01	Not Answered	Document the administrative policies and procedures used to meet this requirement.	All
49.02	Not Answered	Includes a description of the Privacy Official's responsibilities and duties.	All
49.03	Not Answered	References a personnel clearance framework.	All
49.04	Not Answered	Specifies a hierarchy of privacy and security management roles.	All
49.05	Not Answered	Outlines the procedures for nominating candidates to fill the role.	All
49.06	Not Answered	Outlines the procedures for selecting a candidate for the privacy management role.	All
49.07	Not Answered	Explains any overlapping duties.	All

This is the Requirement Tasks screen. All levels of users can access this screen.

Each Requirement is broken down into Requirement Test/Task items. At this time there may be up to 20 such items for each Requirement. The HIPAA Rule, Functional Area, Project Category, Regulatory Authority, and Requirement Introduction indicate how this Requirement is categorized. The Requirement Question shows the Requirement under discussion.

Requirement settings, modifications, and data entry are only allowed by users that are assigned to the particular Requirement and are part of the team of users working on the particular gap analysis/assessment.

The text of the Requirement or Test/Task Items cannot be modified. Tasks (or Test Items) are numbered, for example 1.01, 1.02, 1.03.... The number before the period signifies the Requirement number, the two digits after the period the Test/Task Item. The numbering system is proprietary and idiosyncratic to HIPAA BASICS™ and not related to regulation text.

Exhibit 7-5. Requirements Tasks Screen Test/Task Items

ID	Status	Requirement Test	Applicability
49.01	Not Answered	Document the administrative policies and procedures used to meet this requirement.	<input checked="" type="checkbox"/>
49.02	Not Answered	Includes a description of the Privacy Official's responsibilities and duties.	<input checked="" type="checkbox"/>
49.03	Not Answered	References a personnel clearance framework.	<input checked="" type="checkbox"/>
49.04	Not Answered	Specifies a hierarchy of privacy and security management roles.	<input checked="" type="checkbox"/>
49.05	Not Answered	Outlines the procedures for nominating candidates to fill the role.	<input checked="" type="checkbox"/>
49.06	Not Answered	Outlines the procedures for selecting a candidate for the privacy management role.	<input checked="" type="checkbox"/>
49.07	Not Answered	Explains any overlapping duties.	<input checked="" type="checkbox"/>
49.08	Not Answered	Oversight responsibility for information privacy and security can be traced to the highest level of the organization.	<input checked="" type="checkbox"/>
49.09	Not Answered	The governing board has adopted a formal resolution or charter amendment that reflects its commitment to protect information privacy and security.	<input checked="" type="checkbox"/>
49.10	Not Answered	Duties and responsibilities of the Privacy Official are periodically reviewed to ensure consistency with the organization's needs.	<input checked="" type="checkbox"/>
49.11	Not Answered	Specifies that the documented designation of the Privacy Official is retained for a period of six years.	<input checked="" type="checkbox"/>

The Test/Task Items are set to "Applicable" by default (there will be a check mark in the Applicability field to the right of the screen). A user can modify these settings and turn the Applicability off or on. Test/Task Items marked as "Not Applicable" (no check mark) will not be part of the Report or associated Project Plan.

The purpose of the Applicability feature is to allow for tailoring of a gap analysis/assessment to a user's particular circumstance and need. For example, turning all but the Requirements under the Privacy rule to Not Applicable will allow for a "Privacy only" gap analysis/assessment and report. The Lead User controls the applicability settings.

If a Test/Task Item is marked as applicable, the check mark will be displayed. If applicable, the user may answer the Item by clicking on the drop-down box on the left and setting it to "Complete" or "Incomplete".

"Not Answered" is the initial setting if a Requirement Test/Task has never been answered. "Incomplete" indicates a Gap and will trigger a Task in the Project Plan for

this gap analysis/assessment. "Complete" suggests that this item is completed and no further task or actions step toward compliance is suggested.

It is also possible to mark ALL items as Incomplete or Complete. Use the All Complete/Not Complete check box above the test/task items to mark all at once.

In order for any entries or changes to take effect the User must click the **Update** button at the top or bottom of the screen. If you do not see the button, it means that this particular Requirement is not assigned to you and you cannot make any changes effective. The Lead User will always see the **Update** button and can modify the entry.

Selective viewing is possible by toggling between "Applicable", "Not Applicable", and "All". This will display only the selected part of the listed Requirement Test/Task items, without editing the content.

Clicking on the underlined text of a Requirement Test/Task item will open the screen for entering Task Notes. The user can enter a Task Note for each and every Requirement Test/Task item of a gap analysis/assessment, if the Requirement is assigned to him or her. This Task Note will be displayed in the Report if the user chooses, and also incorporated in an associated project plan.

Clicking on **Requirement Question** will open the screen for entering Requirement Notes for the Requirement under discussion. The user can enter a Requirement Note for each and every Requirement that is assigned to him or her in a particular gap analysis/assessment. This Requirement Note will be displayed in the Gap Analysis Report and also incorporated in an associated project plan.

Only the Subscriber Administrator and Lead User of a Gap Analysis Project can edit all Notes.

Additional navigational buttons are provided for users in the Requirement Tasks area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the Gap Analysis Project List by clicking on **Menu**.
- ▶ Go back to the Gap Analysis Project List by clicking on **Back**.

7.4 Making Requirement Notes

Exhibit 7-6. Requirement Tasks Screen – Requirement Question

HIPAA BASICS™

Subscriber: SMS Inc
Data Collection Date: 12/1/2002
Project Start: 12/1/2002
Cap ID: MTT-1 (RELEASE 1)
Lead User: Jane Doe
Target Completion: 12/1/2002

Please click on Add/Update to save changes...

[Log Off](#) [Menu](#) [Back](#) **Requirement Tasks** [Help](#)

HIPAA Rule Standards for the Privacy of Individually Identifiable Health Information

Functional Area Human Resources

Project Category V: Management Personnel

Requirement Question 49: Documented policies and procedures for formally designating a person as the official who will be responsible for the development and implementation of policies and procedures regarding the privacy of individual health information.

Regulatory Authority HIPAA provisions require covered entities to designate an employee or other person to serve as the official responsible for the development of policies and procedures for the use and disclosure of protected health information. The designation of an official would focus the responsibility for development of privacy policy. (§ 164.530(a))

Requirement Intro The organization should designate a management level employee who will oversee the development, implementation, and management of activities ensuring the privacy of individual health information.

Assigned to: Jane Doe

☐ All Complete/Not-Complete [Update](#) ☐ All Applicable/Not Applicable

ID	Status	Requirement Test	Applicability
49.01	Not Answered	Document the administrative policies and procedures used to meet this requirement.	<input checked="" type="checkbox"/>
49.02	Not Answered	Includes a description of the Privacy Official's responsibilities and duties.	<input checked="" type="checkbox"/>
49.03	Not Answered	References a personnel clearance framework.	<input checked="" type="checkbox"/>
49.04	Not Answered	Specifies a hierarchy of privacy and security management roles.	<input checked="" type="checkbox"/>
49.05	Not Answered	Outlines the procedures for nominating candidates to fill the role.	<input checked="" type="checkbox"/>
49.06	Not Answered	Outlines the procedures for selecting a candidate for the privacy management role.	<input checked="" type="checkbox"/>
49.07	Not Answered	Explains any overlapping duties.	<input checked="" type="checkbox"/>

Click on the **Requirement Question** link on the Requirement Tasks screen. This will open the screen for entering Requirement Notes.

Exhibit 7-7. Requirement Notes Screen

HIPAA BASICS™

Please click on Add/Update to save changes...

[Log Off](#) [Menu](#) [Back](#) **Requirement Notes** [Help](#)

HIPAA Rule Standards for the Privacy of Individually Identifiable Health Information

Functional Area Human Resources

Project Category V: Management Personnel

Requirement Question 49: Documented policies and procedures for formally designating a person as the official who will be responsible for the development and implementation of policies and procedures regarding the privacy of individual health information.

Regulatory Authority HIPAA provisions require covered entities to designate an employee or other person to serve as the official responsible for the development of policies and procedures for the use and disclosure of protected health information. The designation of an official would focus the responsibility for development of privacy policy. (§ 164.530(a))

Requirement Intro The organization should designate a management level employee who will oversee the development, implementation, and management of activities ensuring the privacy of individual health information.

Requirement Notes:

[Update](#)

This is the Requirement Notes screen. All Levels of Users can access this screen.

The user can enter text into the Requirement Notes field for each Requirement assigned to him or her in a Gap Analysis Project. This Requirement Note will be displayed in the Reports, if desired, and also incorporated in an associated project management plan.

You **MUST** click on the **Update** button in order to make the Note entry effective. If you do not see an **Update** button it is because this Requirement is not assigned to you for answering.

Different from the Requirement Notes are the Task Notes. They should be used to comment on a particular test/task item of a Requirement. Task Notes will also appear in the Report, if desired.

Additional navigational buttons are provided for users in the Requirement Notes area:

- **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- Go back to the Gap Analysis Project List by clicking on **Menu**.
- Go back to the Requirement Tasks by clicking on **Back**.

7.5 Writing Task Notes

Exhibit 7-8. Requirement Tasks Screen – Task Notes

The screenshot displays the 'Requirement Tasks' screen in the HIPAA BASICS application. At the top, there is a header bar with the HIPAA BASICS logo and a status bar showing 'Subscriber: SHSinc', 'Data Collection Date: 12/1/2002', 'Project Start: MTF-1 (RELEASE 1)', 'Gap ID: June 2002', 'Lead User: [blank]', and 'Target Completion: [blank]'. Below the header, a navigation bar includes buttons for 'LogOff', 'Menu', 'Back', and 'Help'. The main content area is titled 'Requirement Tasks' and displays details for a specific requirement: 'HIPAA Rule Standards for the Privacy of Individually Identifiable Health Information'. It lists the 'Functional Area' as 'Human Resources', the 'Project Category' as 'Management Personnel', and the 'Requirement Question' as '49. Documented policies and procedures for formally designating a person as the official who will be responsible for the development and implementation of policies and procedures regarding the privacy of individual health information.' The 'Regulatory Authority' is cited as 'HIPAA provisions require covered entities to designate an employee or other person to serve as the official responsible for the development of policies and procedures for the use and disclosure of protected health information. The designation of an official would focus the responsibility for development of privacy policy. [§ 164.530(a)]'. The 'Requirement Intro' states 'The organization should designate a management level employee who will oversee the development, implementation, and management of activities ensuring the privacy of individual health information.' Below this, a table lists tasks assigned to 'Jane Doe'. The table has columns for 'ID', 'Status', 'Requirement Test', and 'Applicability'. The tasks are numbered 40.01 through 40.07, all with a status of 'Not Answered'. The tasks include: 'Document the administrative policies and procedures used to meet this requirement.', 'Includes a description of the Privacy Official's responsibilities and duties.', 'References a personnel clearance framework.', 'Specifies a hierarchy of privacy and security management roles.', 'Outlines the procedures for nominating candidates to fill the role.', 'Outlines the procedures for selecting a candidate for the privacy management role.', and 'Explains any overlapping duties.' Each task has a checkbox in the 'Applicability' column, all of which are checked.

ID	Status	Requirement Test	Applicability
40.01	Not Answered	Document the administrative policies and procedures used to meet this requirement.	<input checked="" type="checkbox"/>
40.02	Not Answered	Includes a description of the Privacy Official's responsibilities and duties.	<input checked="" type="checkbox"/>
40.03	Not Answered	References a personnel clearance framework.	<input checked="" type="checkbox"/>
40.04	Not Answered	Specifies a hierarchy of privacy and security management roles.	<input checked="" type="checkbox"/>
40.05	Not Answered	Outlines the procedures for nominating candidates to fill the role.	<input checked="" type="checkbox"/>
40.06	Not Answered	Outlines the procedures for selecting a candidate for the privacy management role.	<input checked="" type="checkbox"/>
40.07	Not Answered	Explains any overlapping duties.	<input checked="" type="checkbox"/>

The user can enter text into the Task Notes field for a Requirement Test/Task of each and every Requirement that is assigned to him or her in a particular gap analysis/assessment.

Click on the text of the test/task to enter the Task Note area.

Exhibit 7-9. Task Notes Screen

Please click on Add/Update to save changes...

[LogOff](#) [Menu](#) [Back](#) **Task Notes** [Help](#)

HIPAA Rule	Standards for the Privacy of Individually Identifiable Health Information
Functional Area	Human Resources
Project Category	V: Management Personnel
Requirement Question	49: Documented policies and procedures for formally designating a person as the official who will be responsible for the development and implementation of policies and procedures regarding the privacy of individual health information.
Regulatory Authority	HIPAA provisions require covered entities to designate an employee or other person to serve as the official responsible for the development of policies and procedures for the use and disclosure of protected health information. The designation of an official would focus the responsibility for development of privacy policy. [§ 164.530(a)]
Requirement Intro	The organization should designate a management level employee who will oversee the development, implementation, and management of activities ensuring the privacy of individual health information.

TaskID: 49.01
Requirement Test: Document the administrative policies and procedures used to meet this requirement.
Task Notes:

[Update](#)

This is the Task Notes screen. All Levels of Users can access this screen.

This Task Note will be displayed in the Report if chosen by the user, and also incorporated in an associated project management plan.

TMA requires a Task Note for each and every task.

You **MUST** click on the **Update** button in order to make the Note entry effective. If you do not see an **Update** button it is because this Requirement and its test/task items are not assigned to you for answering or modification. A Lead User can modify all Task Notes of the gap analyses/assessments he or she has set up.

Different from the Task Notes are the Requirement Notes. They should be used to comment on the Requirement in general. They can also be displayed in the Report.

Additional navigational buttons are provided for users in the Task Notes area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the Gap Analysis Project List by clicking on **Menu**.
- ▶ Go back to the Gap Analysis Project List by clicking on **Back**.

8. REPORTING

8.1 Generating the Reports

Only Lead Users and the Subscriber Administrator have the capability to create a report.

HINT: Reports can be generated multiple times throughout the gap analysis/assessment process. However, it is recommended that strict version control be implemented to ensure all users are working from the same report at any given time.

Exhibit 8-1. Gap Analysis Project List Screen

Subscriber : SMSInc


LogOff Back Gap Analysis Project List Info Contact Us Help

Baseline Administrative Simplification Integrated Compliance Solution

Client Data Entry	Answer	Assign	Data Collection Date	Gap ID	Rel	Edit	Report	Status
<input type="radio"/> Users <input checked="" type="radio"/> Gap Analysis Project List <input type="radio"/> Policies & Forms Jane Doe 112 S. West Street Suite 200 Alexandria VA 22314 US 703-555-5555 Current User Add Gap	SMSInc	Subscriber Administrator	10/31/2002	DEMO GAP	1			
	SMSInc	Jane Doe	12/1/2002	MTF-1	1	Edit	Report	Status

From the Gap Analysis Project List screen, click on the **Report** link to access the report feature.

Exhibit 8-2. Reporting Screen

		Subscriber : SMSInc Data Collection Date : 12/1/2002 Project Start : Gap ID : MTF-1 (RELEASE 1) Lead User : Jane Doe Target Completion :	
LogOff	Menu	Back	Report
<p align="center">Lead User: Jane Doe</p>			
<input checked="" type="radio"/> HIPAA Rule <input type="radio"/> Functional Area <input type="radio"/> Category <input type="radio"/> Requirements <input type="radio"/> Combinations			
<div style="border: 1px solid black; padding: 5px;"> Standards for Electronic Transactions and Code Sets National Standard Health Care Provider Identifier Security and Electronic Signature Standards Standards for the Privacy of Individually Identifiable Health Information National Standard Employer Identifier National Standard Health Plan Identifier </div>			
<input checked="" type="checkbox"/> Include Intro	<input checked="" type="checkbox"/> Include Authority	<input checked="" type="checkbox"/> Include Document Source	<input checked="" type="checkbox"/> Include Reg Req
<input checked="" type="checkbox"/> Include Req Test	<input checked="" type="checkbox"/> Include Category	<input checked="" type="checkbox"/> Include Requirement Note	<input checked="" type="checkbox"/> Include Task Note
Report	Printable Report	Printable ReportPdf	

This is the Report screen. Only Lead Users and Subscriber Administrator users can access this screen.

8.2 Filtering Reports

The user can choose to filter by HIPAA Rule, Functional Area, Category, Requirements, or Combinations. Then, he/she can generate a Report on compliance with standards by either selecting one or a set of HIPAA Rules, one or a set of Functional Areas, one or a set of Categories, or one or a set of Requirements. The user can select the one item or set of items by pressing the CTRL key and clicking each item, or by just dragging the mouse through all of the items without removing it from the selections.

Exhibit 8-3. Reports by Filter

Subscriber: SMSSinc
Data Collection Date: 12/1/2002
Project Start:
Cap ID:
Lead User: Jane Doe
Target Completion:

Logout Menu Back Report Help

Lead User: Jane Doe

☐ HIPAA Rule
 ☐ Functional Area
 ☐ Category
 ☒ Requirements
 ☐ Combinations

☒ HIPAA Rule
 ☐ Functional Area
 ☐ Category

Standards for Electronic Transactions and Code Sets

#	Requirement Question	Select all
1	Utilizing the "ASC X12N 837 - Health Care Claim: Institutional Volumes 1 and 2, Version 4010" standard for transactions used to submit institutional health care claims and/or encounter information.	<input type="checkbox"/>
2	Utilizing the "ASC X12N 837 - Health Care Claim: Professional Volumes 1 and 2, Version 4010" standard for transactions used to submit professional health care claims and/or encounter information.	<input type="checkbox"/>
3	Utilizing the "ASC X12N 837 - Health Care Claim: Dental Version 4010" standard for transactions used to submit dental health care claims and/or encounter information.	<input type="checkbox"/>
4	Utilizing the "ASC X12N 835 - Health Care Claim Payment/Advice Version 4010" standard for transactions used to make a payment, information about the transfer of funds, and payment processing information to a financial institution for a health care provider.	<input type="checkbox"/>
5	Utilizing the "ASC X12N 835 - Health Care Payment/Advice Version 4010" standard for transactions used to send a remittance advice directly to a health care provider (sending data only).	<input type="checkbox"/>
6	Utilizing the "ASC X12N 835 - Health Care Payment/Advice Version 4010" standard for transactions used to make payment and send an explanation of benefits to a health care provider via a financial institution.	<input type="checkbox"/>
7	Utilizing the "ASC X12N 837 - Health Care Claim: Institutional Volumes 1 and 2, Version 4010" standard for transactions used to transmit coordination of benefit information to a health plan for the purpose of determining the relative payment responsibilities of the health plan of (a) institutional claims; (b) payment information.	<input type="checkbox"/>
8	Utilizing the "ASC X12N 837 - Health Care Claim: Professional Volumes 1 and 2, Version 4010" standard for transactions used to transmit coordination of benefit information to a health plan for the purpose of determining the relative payment responsibilities of the health plan of (a) professional claims; (b) payment information.	<input type="checkbox"/>

There is a slight difference in the way the user can select the items for print when using the "Requirements" versus "Combination" option. In the "Requirements" option all Requirements are available. In the "Combination" option the user first has to select a subset of Requirements from one HIPAA Rule, one Functional Area, or one Category. Instead of using the CTRL key and clicking each item, selection is done by checking the respective checkboxes next to the Requirement Questions.

HINT: Note that when you make the selection of a subset of items, you may not write a report on any number of Requirements. For example, when choosing the "Combinations" option the user cannot create a Report with any number of Requirements from the Privacy AND Security Rule, or from the Access Controls AND Management Personnel Category. Selections can only be made from one Rule, or Category, or Functional Area. The selections cannot crossover. To do that, the user would have to select the "Requirements" option. The best way to learn the Report feature is by doing some. Create a few different reports!!!

8.3 Modifying Reports

To create a shorter report or an executive style report, the user can make selections using the checkboxes at the bottom of the Report screen.

Exhibit 8-4. Report Styles

The screenshot shows the 'Report' screen in the HIPAA BASICS application. At the top, there is a header bar with the 'HIPAA BASICS™' logo on the left and a list of user information on the right: Subscriber: SMSInc, Data Collection Date: 12/1/2002, Project Start, Gap ID: MTF-1 (RELEASE 1), Lead User: Jane Doe, and Target Completion. Below the header is a navigation bar with buttons for 'LogOff', 'Menu', 'Back', 'Report', and 'Help'. The main content area displays 'Lead User: Jane Doe' and a list of report categories: HIPAA Rule (selected), Functional Area, Category, Requirements, and Combinations. Under 'HIPAA Rule', a list of standards is shown: Standards for Electronic Transactions and Code Sets, National Standard Health Care Provider Identifier, Security and Electronic Signature Standards, Standards for the Privacy of Individually Identifiable Health Information, National Standard Employer Identifier, and National Standard Health Plan Identifier. Below this list are eight checkboxes, all of which are checked: Include Intro, Include Authority, Include Document Source, Include Reg Req, Include Req Test, Include Category, Include Requirement Note, and Include Task Note. At the bottom of the screen are three buttons: 'Report', 'Printable Report', and 'Printable ReportPdf'.

Choosing to include or exclude certain text components of the Report alters the style of the Report. The default is that all checkboxes are checked, indicating that everything is included. The user can check off/on any of the items and decide what will be included in the Report. The Report will not be generated unless you click on the **Report**, **Printable Report**, or **Printable ReportPdf** buttons.

To get a printable version of the entire report, click on the **Printable Report** button. For a downloadable PDF (Adobe Acrobat) version click on the **PrintableReportPdf** button. Only the PDF version can be downloaded and emailed to other users.

To view the entire report, page by page on the web, choose **Report** and navigate by using the NEXT and PREV buttons at the bottom of the report. This report may be advisable if you are on a slower connection or have low memory computer, as less information is loaded into the Browser at one point in time.

Exhibit 8-5. Gap Analysis Report

HIPAA Gap Analysis Report	
SMS Inc. 112 South West Street Alexandria VA 22314 USA	
Lead User: Jane Doe	Data Collection Date: 5/21/2002
HIPAA Rule: Standards for the Privacy of Individually Identifiable Health Information This rule establishes standards to protect the privacy of individually identifiable health information that is maintained or transmitted in connection with certain administrative and financial transactions, and applies to health plans, health care clearinghouses, and certain health care providers. IT sub-sets standards with respect to the rights of individuals to their health information, procedures for exercising those rights, and the authorized and required use and disclosure of such information.	
IX. Management of Protected Health Information	
No.	Requirement-Question
112	Compliance: Identifying when routine health information becomes protected health information.
Regulatory Requirement:	Develop policies and procedures for identifying when routine health information becomes protected health information.
Regulatory Authority:	Covered entities must obtain patient consent or authorization before using or disclosing protected health information, with only certain exceptions. In order to properly comply with these requirements, employees must be able to accurately identify health information as protected health information. [§ 164.506(a); § 164.508(a) - (f)]
Documentation Source:	Policy and Procedure
Requirement Intro:	Protected health information means individually identifiable health information that is (a) transmitted by electronic media, (b) maintained in any electronic medium (as described under HIPAA), or (c) transmitted or maintained in any other form or medium.
Task ID Requirement Test	Status
01 The administrative policies and procedures used to meet this requirement are documented.	Not Assessed
02 Is/does the definition of individually identifiable health information as defined under HIPAA regulations.	Not Assessed
03 Is/does an explanation of when health information becomes protected health information, as described under HIPAA regulations.	Not Assessed
04 Identify the person(s) responsible for identifying routine health information as protected health information in the Not Assessed event of a discrepancy.	
No.	Requirement-Question
	Disclosure and requesting only the minimum amount of requested health information necessary to

Additional navigational buttons are provided for users in the Report area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the Gap Analysis Project List by clicking on **Menu**.
- ▶ Go back to the Gap Analysis Project List by clicking on **Back**.

8.4 Graphical Status Report

Graphical status reports, which display compliance in bar graph format, as well as percentages, can be generated by the Subscriber Administrator and the Lead Users.

From the Gap Analysis Project List screen, click on the **Status** link. This link only appears for the gap analysis/assessments owned by the Lead User and for the Subscriber Administrator.

Exhibit 8-6. Lead User - Status Page

HIPAA BASICS™

Subscriber : SMSInc
Data Collection Date : 12/1/2002
Project Start :
Gap ID : MTF-1 (RELEASE 1)
Lead User : Jane Doe
Target Completion :

[LogOff](#) [Menu](#) [Back](#) **Status** [Help](#)

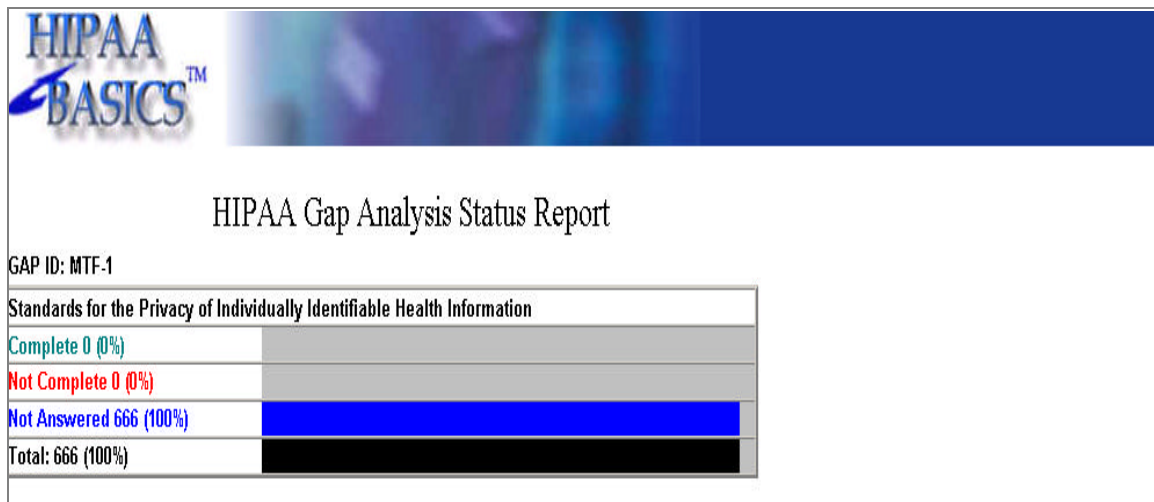
Lead User: Jane Doe

☒ HIPAA Rule ☐ Functional Area ☐ Category ☐ Requirements ☐ All

Standards for Electronic Transactions and Code Sets
National Standard Health Care Provider Identifier
Security and Electronic Signature Standards
Standards for the Privacy of Individually Identifiable Health Information
National Standard Employer Identifier
National Standard Health Plan Identifier

[Report](#)

The Status screen allows the Subscriber Administrator and Lead Users to view Status Reports. The user can choose to filter by HIPAA Rule, Functional Area, Category, Requirements, or All. Users can then select any combination or just one item from the drop down list. (Use CTRL and Right Mouse click to highlight the selection). To generate a Status Report for the gap analysis/ assessment press the **Report** button. A graphical Status Report will be displayed. Use the Print button on your Browser to print the Status Report. Status Reports cannot be saved.

Exhibit 8-7. Gap Analysis Status Report in Graphic Format

Additional navigational buttons are provided for users in the Status area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the Gap Analysis Project List by clicking on **Menu**.
- ▶ Go back to the Status screen by clicking on **Back**.

8.5 Upgrade the Gap Analysis/Assessment

HIPAA BASICS™ will be updated periodically. This occurs when a HIPAA regulatory change occurs. Once an NPRM HIPAA Rule is finalized, the tool will be updated and a new Release is published. Users will be notified well in advance, both on upcoming regulatory changes as well as upcoming publications of New Releases of the tool. To have access to the New Release, no action is required by the users.

Users also have the option to “Upgrade” a gap analysis/assessment that was started under the prior Release so that it is compliant with the current regulations.

Using the Edit screen in HIPAA BASICS™, users can click on **Upgrade to New Release** to upgrade to the new version of HIPAA BASICS. Due to Regulatory changes, some of the Requirements and Tasks Notes, Task Status and Requirement Assignments may be lost. Note there is no Undo step to this and great care should be taken before carrying out an Upgrade.

HINT: This button is visible only if there is a newly published Release of HIPAA BASICS Requirements Data in the system and the Gap Analysis Project is of the previous contiguous Release. There is NO undo of this step. It is strongly suggested that BEFORE using this feature the user creates a PDF Report of the entire Gap Analysis and downloads this PDF file in order to preserve all entered comments and answers in electronic format.

8.6 Trace Reports

Once an NPRM HIPAA Rule is finalized, the tool will be updated and a new Release will be published. Users will be able to see from Trace Reports which changes have occurred. The Subscriber Users can access Trace Reports through the **Info** Link.

The **Requirement List Trace Report** shows Requirements as No Change, Minor Change, Major Change, Newly Added, and Deleted. If Requirements have not been changed or deleted, they are marked as No Change. If the Requirement was marked as a Major Change, your answers will not be carried over and you will have to answer this requirement again. Also, Newly Added Requirements will be shown as Not Answered. If it is a Minor Change, answers will get carried over. Because of Requirement changes, the Requirement Number will be changed and will be referred to as the “New #” on this Trace Report.

Exhibit 8-8. Requirement List Trace Report

108	108	No Change
109	109	No Change
110	110	No Change
111	111	No Change
112	112	Minor Change
113	113	Major Change
114	114	Minor Change
115	115	Minor Change
116	-	Deleted
117	-	Deleted
118	118	Minor Change


On the other Trace Reports, you will be able to view the changes between the previous Version of HIPAA BASICS™ (Previous Release) and the current Version (Current Release).

8.6.1 Requirement Trace Reports

Upon the publication of a new Version of HIPAA BASICS™ Trace Report(s) are posted on the **Info** page for downloading. In case of difficulty with the downloading, a user can request the following Report (s) from the TMA HIPAA Help Desk.

The Newly Added Requirements are listed in the Newly Added Requirements Trace Report. For all Requirements that have undergone Major Changes, the user should refer to the more detailed Major Change Tasks Trace Report.

Exhibit 8-9. Requirement Trace Report (Newly Added)


	
<i>Requirements Trace Report (Newly Added)</i>	
<i>Fields</i>	<i>Version2</i>
<i>Requirement</i>	116. Identifying when the organization would need to create a limited data set.
<i>HIPAA Rule</i>	Standards for the Privacy of Individually Identifiable Health Information
<i>Category</i>	IX. Management of Protected Health Information
<i>Functional Area Asked</i>	Compliance
<i>Functional Area Assigned</i>	Compliance
<i>Regulatory Requirement</i>	Develop policies and procedures for identifying when the organization would need to create de-identified health information.
<i>Documentation Source</i>	Policy and Procedure
<i>Regulatory Authority</i>	A covered entity may use protected health information to create, use and disclose a limited data set for the purposes of research, public health and health care operations, provided that the entity enters into a proper data use agreement with the recipient of the limited data.

8.6.2 Task Trace Reports

The User can also review modifications to tasks in the posted Task Reports. We recommend that you revisit all Tasks that have undergone a "Major Change" or have been "Newly Added." The following reports state the changes.


The Newly Added Tasks are listed in the Newly Added Task Trace Report.

Exhibit 8-10. Task Trace Report (Newly Added)

	
Task Trace Report (Newly Added)	
Version 2	
52. The Privacy Officer has been trained regarding the privacy of individual health information.	
52.05 Training of the Privacy Officer includes policies and procedures related to administrative requirements.	
52.06 Training of the Privacy Officer includes policies and procedures for uses and disclosures of protected health information.	
113. Disclosing and requesting only the minimum amount of protected health information necessary to accomplish the purpose of the particular use or disclosure.	
113.08 Includes criteria designed to limit the protected health information requested to the information reasonably necessary to accomplish the purpose for which request is made.	
113.09 Requests for disclosures are reviewed on an individual basis in accordance with criteria designed to limit the protected health information requested to the information reasonably necessary to accomplish the purpose for which the request is made.	
116. Identifying when the organization would need to create a limited data set.	
116.01 The administrative policies and procedures used to meet this requirement are documented.	
116.02 The entity uses protected health information to create, or discloses protected health information to a business associate to create, a limited data set only for the following purposes: (a) research; (b) public health; or (c) health care operations.	

The Major Change Tasks Trace Report will show the major changes on the Current Version compared to the Previous Version.

Exhibit 8-11. Task Trace Report (Major Change)

	
Task Trace Report (Major Change)	
Version 2	Version 1
36. Utilizing the ICD-9-CM, Vol. 3 code set for medical data pertaining to the prevention, diagnosis, treatment, and management of hospital inpatients.	36. Utilizing the ICD-9-CM, Vol. 3 code set for medical data pertaining to the prevention, diagnosis, treatment, and management of hospital inpatients.
36.03 The code set is installed in the test environment.	36.03 A development and test environment exists mimicking the current environment.
43. Conducts tests of a sample of transactions to see whether they are being written correctly.	43. Conducts tests of a sample of transactions to see whether they are being written correctly.
43.10 Generates a sample ASC X12N 837 - Dental Health Care Claim, for pre-adjudication.	43.10 Generates a sample ASC X12N 837 - Dental Health Care Claim, with dependents.
52. The Privacy Officer has been trained regarding the privacy of individual health information.	52. The Privacy Officer has been trained regarding the privacy of individual health information.
52.03 Training of the Privacy Officer includes policies and	52.08 Training includes policies and procedures for initiating that

When the User chooses to Upgrade a particular gap analysis/assessment from the Previous Version (Release) to the Current Version, please note that all Tasks of Major Change and Newly Added Requirements will be reset to "Not Answered" and Notes for these Requirements and associated Tasks will be reset to Null. Therefore, the User should create a PDF Report of your entire gap analysis/assessment, including all HIPAA Rules, **before** the Upgrade.

Please note that if a Requirement is categorized as having undergone a Major Change, all of its Tasks will be classified as Major Change, even if some of them may have remained the same text in the New Version. This has been done to ensure that you address the Standard (Requirement) in its entirety and be fully compliant with all aspects of it.

9. PROJECT PLAN

9.1 Generating a Project Plan

The Subscriber Administrator and Lead User can generate a project plan to help guide the implementation efforts of the organization. The project plan that is downloaded from HIPAA BASICS™ contains all the data entered by the users during an assessment, including compliance status and notes.

Exhibit 9-1. Setting up Project Plan

The screenshot shows the 'Edit Gap Analysis' screen in the HIPAA BASICS™ application. The top navigation bar includes 'LogOff', 'Menu', 'Admin', 'Edit Gap Analysis', and 'Help'. Below the navigation bar, there is a message: 'Please click on Add/Update to save changes...'. The main form area contains the following fields:

- Lead User: Jane Doe (dropdown menu)
- Data Collection Date: 12/1/2002 (text box)
- Target Completion: (text box)
- Project Start: (text box)
- Gap ID: MTF-1 (text box)
- Gap Active: ☒ (checkbox)
- Date Completed: 1/31/2003 (text box)
- Notes for Client: (text box)
- Internal: (text box)

At the bottom of the form, there are four buttons: 'Archive to File', 'Project Plan', 'Reassign User Assignments', and 'Update'.

To generate the project plan, the Subscriber Administrator or Lead User must access the Edit Gap Analysis screen and click **Project Plan**.

A prompt may appear containing the number of Requirements marked as “Not Answered”, and ask whether or not you would like to continue. All items marked as “Not Answered” will be converted to “Not Complete” in the project plan.

HINT: If the prompt displays that you have items marked as “Not Answered”, go back to your assessment and check to see where items have not been addressed before generating the project plan. Items that have actually been addressed may be marked as Not Complete and be tasked in the project plan.

To create a Microsoft Project plan with data from the selected Gap Analysis involves downloading a .mdb file to your computer. (You must have MS Project 2000 installed on your computer). These are the steps to create you Microsoft Project plan

1. Please Right click on this link and select Save Target As
HIPAAMSPgapname.mdb to download the [MS Access 2000 file](#) for the Gap ID:
gapname.
2. Open MS Project on your computer. Choose File->Open from the menu.
3. Select **Files of type Microsoft Access Databases** and open the downloaded file
'HIPAAMSPgapname.mdb'.
4. You may be prompted again to **Open From Database**. Please click on **Open**
button. Finish up by saving the file as an MS Project file (.mpp) and proceed with
this .mpp file.

HINT: Before proceeding make sure the .mdb file is downloaded into a folder or directory on your computer that you will remember.

Additional navigational buttons are provided for users in the MS Project Template area:

- ▶ **LogOff** takes users out of the HIPAA BASICS™ tool.
 - Users must log off or they will be locked out of the system for twenty minutes.
- ▶ Go back to the Edit Gap Analysis screen by clicking on **Back**.

10. TECHNICAL SUPPORT

10.1 Systems Administration

There are three (3) administrative level users: the Help Desk, HBAAdmin, and the HBSuper. The HBSuper is the highest level user with privileges to all accounts including creation and releases of new Release of HIPAA BASICS™. The HBAAdmin cannot modify content for end-users by releasing a new Version.

- ▶ **HBSuper:** This is the highest level user and can do everything, including creating Subscribers and Help Desk users, logging into any user account, and creating and posting new Versions, as HIPAA rules and regulations change. This user can also send group email to some or all account holders to notify them on certain topics, including upcoming regulatory changes.
- ▶ **HBAAdmin:** This is the second highest level of user and can do everything but initiate creation of new Versions and post new Versions. This user can edit draft Versions before New Release. This user cannot create License Paks, but assign and renew existing License Paks for a Subscriber.
- ▶ **TMA HIPAA Help Desk:** The TMA HIPAA Help Desk can be contacted by email to hipaasupport@tma.osd.mil. The Help Desk is available Monday to Friday and will provide answers within 2 business days.

10.2 Getting Information Updates

The **Info** link on the *Gap Analysis Project List* provides information and updates to all users within the tool. Frequently Asked Questions (FAQs) are listed, as well as other relevant HIPAA BASICS™ information as changes in the regulation or in the HIPAA BASICS™ tool occur. This page is updated by the TMA HIPAA Help Desk regularly.

System Updates are communicated to the MTF Subscriber users by email.

Additional help can be requested using the **Contact Us** link on the *Gap Analysis Project List*.

The TMA HIPAA Help Desk will respond to requests within TWO BUSINESS DAYS. MTF Subscriber users can contact the help desk at hipaasupport@tma.osd.mil.

10.3 Getting Version Upgrades

HIPAA BASICS™ will be updated periodically. This occurs when a HIPAA regulatory change occurs. Once an NPRM HIPAA Rule is finalized the tool will be updated and a new version is released. Users will be notified in advance, both on upcoming regulatory changes as well upcoming updates to the tool

After a new version is released, users will be able to see changes using Trace Reports. Users have the option to “upgrade” an assessment that was started under the prior Release so that it is compliant with the current regulations.

Information about the New Release can be found at the Info page on the Main Menu. The Release or Version number that is associated with a Gap Analysis is displayed in the **Rel** column on the Main Menu.

The screenshot displays the HIPAA BASICS™ web application. At the top, the logo is on the left, and the subscriber information 'Subscriber : SMSInc' is on the right. Below the logo is a navigation menu with 'LogOff' and 'Back' buttons. The main title is 'Gap Analysis Project List', with 'Info', 'Contact Us', and 'Help' links to its right. Below the title is the subtitle 'Baseline Administrative Simplification Integrated Compliance Solution'. On the left is a sidebar menu with 'Client Data Entry' (containing 'Users', 'Gap Analysis Project List', and 'Policies & Forms') and contact information for Jane Doe. The main content area shows a table of gap analysis projects.

Answer	Assign	Data Collection Date	Gap ID	Rel	Edit	Report	Status
SMSInc	Subscriber Administrator	10/31/2002	DEMO GAP	1			
SMSInc	Jane Doe	12/1/2002	MTF-1	1	Edit	Report	Status

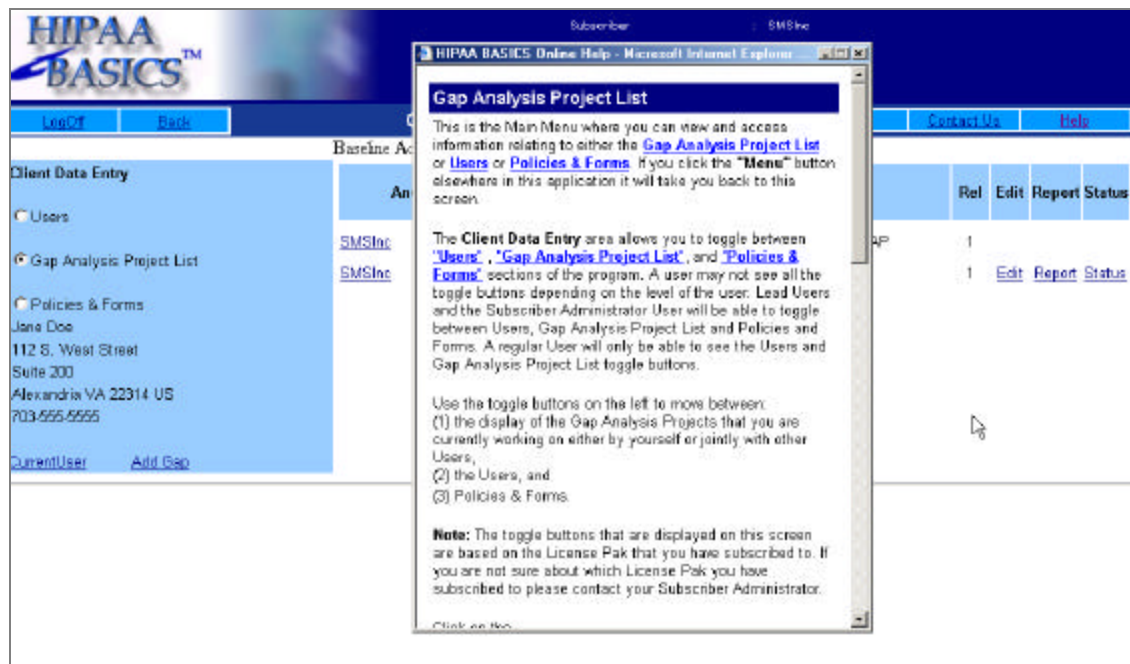
At the bottom of the sidebar, there are links for 'CurrentUser' and 'Add Gap'.

10.4 Help Menus

Each area of HIPAA BASICS™ has a Help link that directs users to detailed help information about the current screen. Click on **Help** to access the information.

The Help Screen also contains links that provide further information on select topics.

Exhibit 10-1. Help Screen



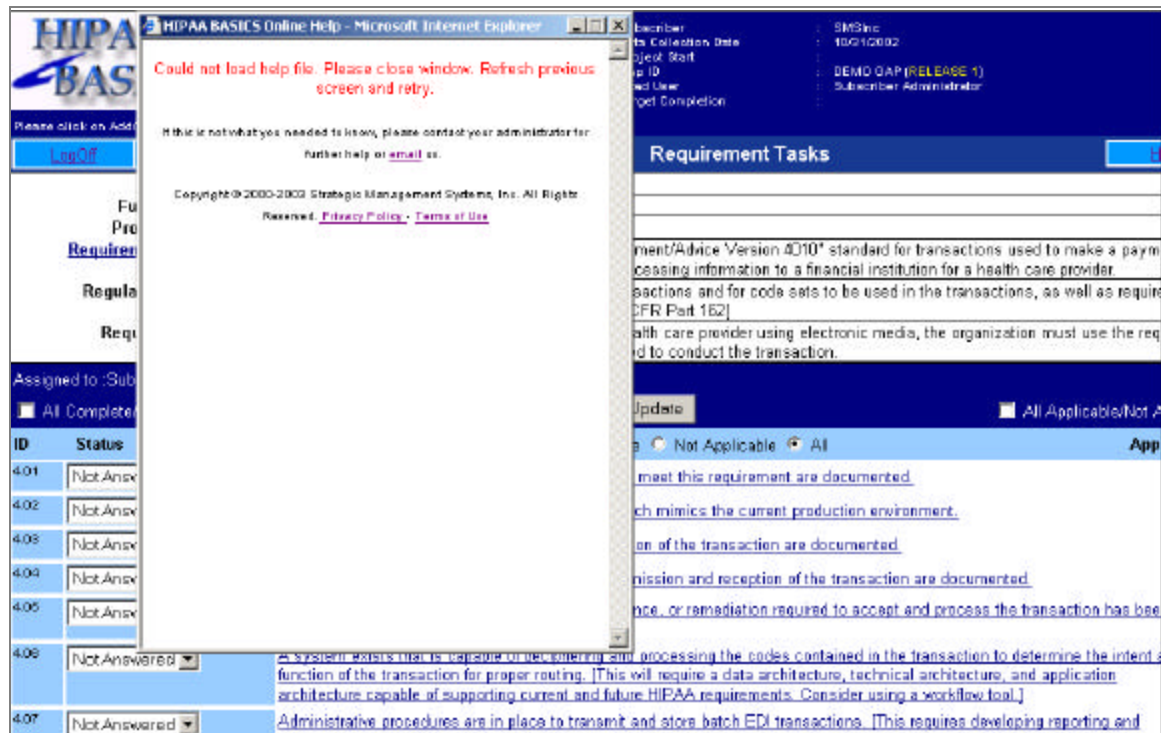
The help menu also contains a link to contact directly the TMA HIPAA Help Desk.


10.5 Troubleshooting

10.5.1 Help Text Display Problem

On clicking the **Help** link, sometimes the users may get a message as shown in the figure below:

Exhibit 10-2. Help Text Display Problem



Please close the pop up window and click the **Help** link again. If you still get this message, please close the pop up window and click on the Microsoft Internet Explorer  button, and click the **Help** link again.

10.5.2 Login Screen Errors

The Subscriber and Help Desk users may experience some login errors.

- ▶ **User already logged in. Multiple Logins not allowed. Please try again after 20 minutes.** Due to security concerns, the system currently limits only ONE login per Subscriber User at a given time. If you do not log off cleanly, you will get this message. Please remember to Log Off before closing your Browser. If this error persists beyond the time specified in the error message, please contact your Subscriber Administrator who can then judge if it is a security breach and assign you a new password.

- ▶ **User Not found. Please check your user ID.** Please reenter your User ID as provided by the Subscriber Administrator. (Also, be sure that you have correctly typed in the name for the Subscriber upon very first login attempt. You may want to delete the Temporary Internet Files ("cookies") on your PC, then close the browser, and start over and login again. Enter the proper Subscriber name.)
- ▶ **Wrong Password. Please check your password.** Passwords are case sensitive. Please reenter your password using the correct Letter Case. Check to see if your CAPS LOCK Key is on.
- ▶ **Not Authorized to view this form. Please contact the Administrator.** Your User ID has a user level associated with it, which defines your user right. You will only be allowed access parts of the system assigned to you by your Subscriber Administrator or HIPAA BASICS Administrator. Please contact your Subscriber Administrator if you are denied access to a screen that you think you should have been assigned to.
- ▶ **Session timed out OR incorrect URL used. Please try again by closing the browser using the appropriate URL.** You may have tried to access a form/screen which you do not have access to. Please contact the TMA HIPAA Help Desk.

Please contact your TMA HIPAA Help Desk in case of any other error message not listed here.

10.6 Archiving

Subscriber Administrator users are advised to use the **Archive** feature in the *Edit Gap Analysis* screen to store a copy of every Gap Analysis/ Assessment on their local computers.

This feature allows the Subscriber Administrator to download and back up the raw data. All the data entered by the Subscriber users, i.e., Complete/ Not Complete, Notes, etc. is stored in the Microsoft Access Tables.

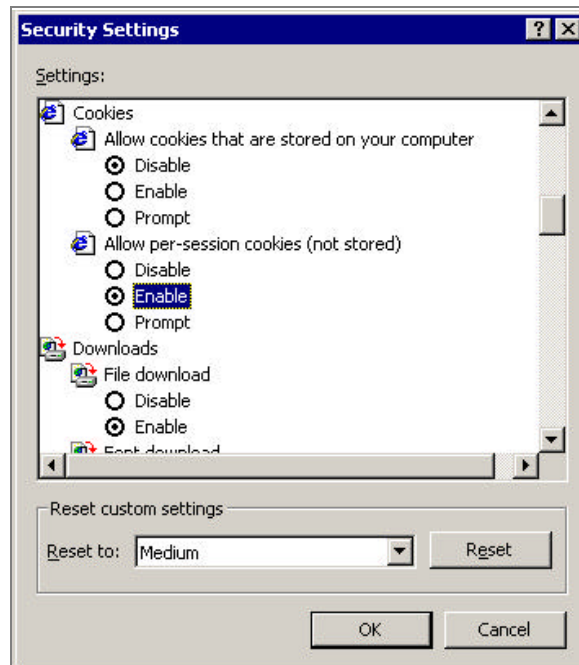
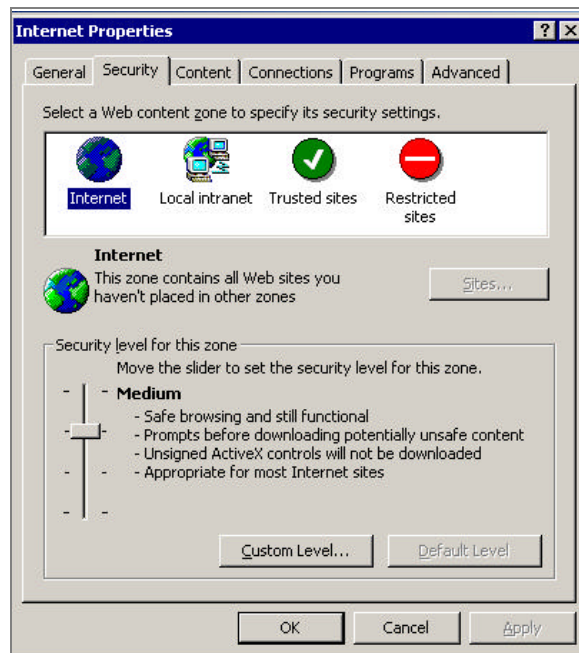
10.7 Technical Configuration

10.7.1 Setting Up the Internet Explorer Browser to Accept Session Cookies

To set this option:

- a. Open Internet Explorer.
- b. Choose **Internet Options** from **Tools** menu and Select the Security Tab from the opened window.
- c. Click on the **Custom Level** button and scroll down the list to view the Cookie section as shown in the figure below.
- d. Make sure you have the option **Allow per session cookies (not stored)** set to **Enabled**.

Exhibit 10-3. Setting Up the Browser to Accept Cookies



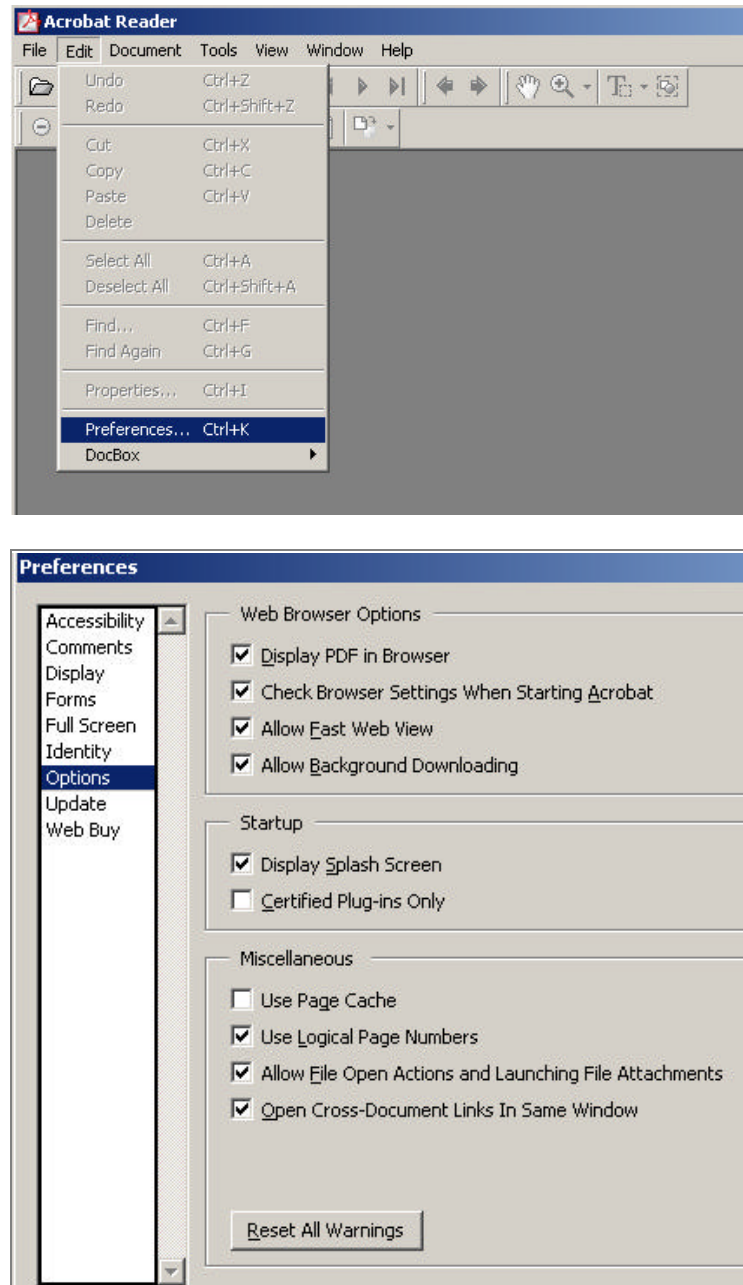
10.7.2 Setting up Adobe Acrobat to view HIPAA BASICS™ PDF documents

To be able to view PDF files using Microsoft Internet Explorer, the Adobe Acrobat Reader should have **Display PDF in Browser** checked.

To set this option:

- a. Open Adobe Acrobat Reader.
- b. Choose **Preferences** from the **Edit** Menu.
- c. Choose **Options** in the list on the left and check the box next to **Display PDF in Browser**.

Exhibit 10-4. Setting up Acrobat to view HIPAA BASICS™ PDF documents



10.8 Group Emails

Occasionally, the MTF Subscriber users may get emails that have been sent by the TMA HIPAA Help Desk of the format similar to shown below.

Exhibit 10-5. Sample TMA HIPAA Help Desk Group Email

```
From: HIPAA BASICS [mailto:hipaasupport@tma.osd.mil]  
Sent: Tuesday, November 12, 2002 12:59 PM  
To: John Doe <johndoe@smsincxyz.biz>  
Subject: Regulatory Update  
  
Date:11/12/2002 ; Time:12:58 .  
  
All Users,  
  
Every once in a while we will notify you on regulation changes, newly proposed rules, or other regulatory events relating to HIPAA. Please read the attached document.  
  
Thank you.  
HIPAA BASICS Helpdesk
```

These emails allow the TMA HIPAA Help Desk to communicate with the MTF Subscriber users.

10.9 Help Desk

Help Desk Users are responsible for creating/ setting up new Subscribers, managing License Paks (but not creating), and assisting the Subscriber Users by e-mail. Help Desk Users have the right to log in as a Subscriber User in order to provide support and/or replicate a reported problem. Help Desk Users communicate with the other users via e-mails that can be sent from within the HIPAA BASICS™ tool.

11. GLOSSARY

To facilitate clarity the following terms will be used through the document and are defined as follows:

Assessment: An Assessment is a gap analysis undertaken to review compliance status. A **Lead User** or **Subscriber Administrator** within a **Subscriber** group conducts an Assessment.

Category: Project Categories are proprietary to HIPAA BASICS™. They serve as filters for the **Requirements** of the different **HIPAA Rules**. Categories also organize the MS Project plan that is generated from a particular assessment in which gaps were identified.

Chief Privacy Official (CPO): The Privacy Official formally assigned the responsibility for a covered entity's compliance with the Privacy rule. Large entities may have additional privacy officials charged with assisting privacy implementation in different facilities of the entity. For example, a large Military Treatment Facility (MTF) entity composed of a medical center and outlying facilities may have more than one "privacy official" subordinate, for implementation actions, to the entity's Chief Privacy Official. A smaller entity, such as a community hospital model MTF may have only a single Privacy Official. The CPO may also be known as the "Chief Privacy Officer" or "Command Privacy Officer".

Covered Entity: A regulatory term used in HIPAA Administrative Simplification. A covered entity is defined as a health plan, clearinghouse, or provider.

HIPAA BASICS™: A commercial off-the-shelf (COTS) web-based application designed to assess and track HIPAA compliance within a healthcare care delivery system or health plan, i.e., a covered entity. HIPAA BASICS comprehensively assesses HIPAA compliance as it covers all **HIPAA Rules**.

HIPAA Rule: One the five Rules that make up the Health Insurance Portability and Accountability Act of 1996 Administrative Simplification. HIPAA BASICS displays only current final Rules. If there has never been a final rule, the NPRM Rule (Notice of Proposed Rule Making) will be displayed.

MTF: Military Treatment Facility. "MTF" for the purpose is an entity that is defined by assignment of compliance responsibility, not by location or size; It is synonymous with the covered entity for which the Chief Privacy Official is responsible. An MTF can be as small as a community hospital and as large as a medical center with multiple clinics and/or other ancillary facilities.

MTF-Level Privacy Assessment: A term used in this CONOPS to label that one particular assessment that is specifically recommended to cover the Privacy compliance

status of the MTF (as defined above) and forms the basis for remediation efforts as well as future tracking.

NPRM (Notice of Proposed Rule Making): The preliminary form in which HIPAA Rules are released before they become final. NPRMs represent “rough drafts” of HIPAA Rules.

New Release: An updated version of HIPAA BASICS with new content that reflects some regulatory change. For example, a New Release would be produced when a HIPAA Rule moved from NPRM status to its final rule.

New Version: A feature of HIPAA BASICS™ that allows the creation of a duplicate (copy) of an existing assessment so that compliance status within that assessment can be updated without destroying the audit trail. This feature allows a lead user to show changes in compliance status while leaving the original assessment record intact and without constructing a new assessment from scratch.

Privacy Team: A workgroup that is assigned organizational planning and remediation responsibilities to accomplish MTF compliance with the Privacy Rule. The CPO typically organizes and leads this team. At a minimum, members of the Privacy Team include HIPAA BASICS Lead and Regular users (see **TeamAssigned**). The team can include other MTF/facility staff as deemed necessary by the **CPO**.

Requirement: A term used in HIPAA BASICS™ that refers to a regulatory standard of a HIPAA Rule.

Subscriber: A HIPAA BASICS™ term that refers to a group of application end users that collaborate on HIPAA assessments and tracking. A Subscriber always includes the following three types of HIPAA BASICS™ users: Subscriber Administrator, Lead User and Regular User. There will be one Subscriber group (subscription) for each **MTF** (as defined above) in the MHS.

TeamAssigned: A term used within HIPAA BASICS™. It refers to a team of HIPAA BASICS™ users within a Subscription who work jointly on an assessment. Each assessment has its own distinct team of users.

TMA: TRICARE Management Activity (TMA), the customer and part of MHS that obtains a license to use the HIPAA BASICS™ tool on its servers or network.

Upgrade to New Version: A feature in HIPAA BASICS™ that allows a user to Upgrade a previous assessment to a New Release of the application.

12. INDEX

- Archiving, 66
- Assigning Teams, 8
- Cookies, 67
- Demo Gap, 12
- PDF documents, 68
- Gap Analysis
 - Adding Projects, 18
 - Administration, 17
 - Gap ID, 24
 - Project List, 23
 - Setting Up, 30
 - Upgrading, 55
- Help Desk, 22, 62, 69
- Logging in, 12
 - Screen Errors, 65
- Policies and Forms, 27
- Privacy Assessment, 8
- Privacy Team, 7
- Progress Tracking, 9
- Project Plan
 - Creating a Remediation Project, 8
 - Generating a Project Plan, 60
- Reports
 - Filtering, 50
 - Generating, 49
 - Graphical Status Reports, 54
 - Modifying, 52
- Requirements
 - Answering, 48
 - Assigning, 35
 - Notes, 46
- System Requirements, vi
- Tasks
 - Notes, 47
- Technical Support, 62
- Trace Reports, 56
- Troubleshooting, 65
- User Administration, 20
- Users
 - Lead Users, 10
 - Regular Users, 11
 - Subscriber, 10
 - Subscriber Administrator, 10
- Version Upgrades, 63, 71